



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JAN -6 AM 11:01

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

PROFESSIONAL PLANNING PARTNERS, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

13965 CHINDEN BLVD; BOISE, ID 83713

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

PAUL WINWARD

13965 CHINDEN BLVD; BOISE, ID 83713

(Name)

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

PAUL WINWARD

13965 CHINDEN BLVD; BOISE, ID 83713

STEVE MINERT

13965 CHINDEN BLVD; BOISE, ID 83713

5. Mailing address for future correspondence (annual report notices):

13965 CHINDEN BLVD; BOISE, ID 83713

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

PAUL WINWARD

Signature

Typed Name:

STEVE MINERT

Secretary of State use only

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Revised: 07/2008

IDAHO SECRETARY OF STATE
01/06/2010 05:00
CK: 1488 CT: 202623 BN: 1202120
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