

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in <u>duplicate</u>.

FILED EFFECTIVE

SECRETARY OF STATE STATE OF IDAHO

W183505

1.	The name of the limited liability company is: Estate Solutions Plus, LLC (Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC.		
2.	The complete street and mailing addresses of the principal office is: 4491 N. Echo Summit Place, Star, ID 83669		
	(Street Address)		
	(Mailing Address, if different)	· · · · · · · · · · · · · · · · · · ·	
3.	The name of the registered agent and street address of the registered agent:		
	Amy Groves	4491 N. Echo Summit Place, Star, ID 83669	
	Name)	(Address cannot be a post office box or postal mail box)	
4.	The name and address of at least one governor of the limited liability company:		
	Amy Groves	4491 N. Echo Summit Place, Star, ID 83669	
	(Name)	(Address)	
	(Name)	(Address	
	(Name)	(Address)	
	(Name)	(Address	
	, reality	t wares	
5 .	Mailing address for future correspondence (annual report notices):		
	4491 N. Echo Summit Place, Star, ID 83669		
	(Address		
Sign	nature of organizer(s).	1	
			Secretary of State use only
Sigi	nature:	hours	IDAHO SECRETARY OF STATE
Printed Name: Arriv Groves			05/18/2017 05:00 CK:1015 CT:339855 BH:1584816 10 100.00 = 100.00 ORGAN LLC #2

Rev. 11/2015

Signature:

Printed Name: