

Signature: ___

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code

	Complete and submi	it the application in duplicate.	SERE AMIO. 3	
1.	The name of the professional limited	d liability company is:		
	Herring Law, PLLC			
2.	The complete street and mailing addresses of the principal office is:			
	381 Shoup Ave, Suite 201, Id	aho Falls, ID 83402		
	,			
	(Mailing Address, if different)	 		
 3. 4. 	Name and street address of registered agent in Idaho:			
	James Alden Herring	381 Shoup Ave, Suite 201, Idaho Falls, ID 83402		
	(Name)	(Address)		
4.	The name and address of at least one governor of the limited liability company:			
	James Alden Herring	381 Shoup Ave, Suite 201, Idaho Falls, ID 83402		
	(Name)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)	- 	
5.	Mailing address for future correspondence (annual report notices):			
	381 Shoup Ave, Suite 201, Idaho Falls, ID 83402			
	(Address)			
6.		company is a professional company, and the principal profession or profession cherwise legally authorized to render professional services is:		
6.	Law			
		1	Secretary of State use only	
7.	Signature of a manager, member	er, or an organizer.	IDAHO SECRETARY OF STATE	
Dri	inted Name:	g	03/27/2017 05:00 CK:247 CT:336840 BH:1575723	
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