Printed Name: \_\_\_\_\_

Signature: \_\_\_

## **CERTIFICATE OF ORGANIZATION PROFESSIONAL** LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplicate.

2017 JUN 23 PH 12: 09

SECRETARY OF STATE

. The name of the professional limited liability company is:  LaFranchi Immigration PLLC			STATE OF IDAHO	
•	_	ddresses of the principal office soise, Idaho 83704	is:	
(Street Address)				
(Mailing Address, if o	lifferent)			
Name and street	t address of registe	ered agent <u>in Idaho</u> :		
Courtney LaF	ranchi	2409 North Redway Road, Boise, Idaho 83704		
(Name)		(Address)	<del></del>	
The name and a	iddress of at least	one governor of the limited liab	ility company:	
Courtney LaFranchi 2409 North Redway Road				
(Name)		(Address)		
(Name)		(Address)		
(Name)		(Address)		
Mailing address	for future correspo	ndence (annual report notices)	:	
2409 North R	edway Road, B	oise, Idaho 83704		
(Address)			<del></del>	
		rofessional company, and the puthorized to render professional	rincipal profession or professions for which members are al services is:	
	La	ιw		
			Secretary of State use only	
Signature of a manager, member, or an organizer.				
inted Name: Courtney LaFranchi			IDAHO SECRETARY OF STATE  06/23/2017 05:00	
-	<del></del>		CK:129 CT:341663 BH:1590450	
I C D D I I	<b>→</b>		יא זהו אחשם מה מחו ב מה מחו שו	

Rev. 08/2015