



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

2013 FEB 22 AM 9: 23

			,			
1. The name	(Instructions on back of the professional limite	k of application ed liability com	n) npany is:	SECHE OF	PARE PARE	
	COMFORTABL			- · ·	L HU	
2 The comp	elete street and mailing ad			ignated office.		
	-			-	.	
(Street Add	210 N. 6 th St	COEUR	d ALENE	_ , LDAHO	83814	
(Mailing Ad	dress, if different than street address)					
3. The name	and complete street add	ress of the rec	gistered age	ent:		
CHAD (Name)	TAYLOR	1210 N. (Street Addres	6th 5t.	COEUR d'Ale	WE, ID	63811
4. The name	• •	one member o	r manager	of the professi	onal limited	l
0	Name		Δ Δ 	Idress	Dr	.61
<u> </u>	A MARTINEZ	1210 N. (4- 1 C	COEUR O AGEN	E 1 D 03	,014 014
	A MARINEZ	1210 N. 6	57 C	DELK O ALEA		બ્ય
_	Idress for future correspond		-	•		
6. Future effe	ective date of filing (option	nal):				
profession	ed liability company is a property of the com	duly licensed o	•	legally authoriz		
Signature of a person.	a manager, member or	authorized				
•		ſ	,	Secretary of State u	se only	
Signature <u>(</u>	1 Toylor	<u>,</u>				
Typed Name:	CHAD TAYLOR					

IDAHO SECRETARY OF STATE 92/22/2013 95:00 CK: 1208 CT: 279762 BH: 1361448 1 0 100.00 = 100.00 PROF LLC # 2

cert_org_plic.pmd Rev. 07/2010

Signature Muari

Typed Name: Nuria Martine2

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