

CERTIFICATE OF ORGANIZATION PROFESSIONAL

(Instructions on back of application)

1. The name of the professional limited liability company is:

FILED EFFECTIVE

2314 GCT 24 PH 4: 14

SEGNERARY OF STATE STATE OF IDAHO

LIMITED LIABILITY COMPANY

McArthur Law, PLLC The complete street and mailing addresses of the initial designated office: 5548 S. Fuchsia Place (Street Address) Boise, ID 83716 (Mailing Address, if different than street address) The name and complete street address of the registered agent: Lorin Shay McArthur 5548 S. Fuchsia Place, Boise, ID 83716 (Name) (Street Address) The name and address of at least one member or manager of the professional limited liability company: <u>Address</u> <u>Name</u> Lorin Shay McArthur 5548 S. Fuchsia Place, Boise, ID 83716 Mailing address for future correspondence (annual report notices): 5548 S. Fuchsia Place, Boise, ID 83716 6. Future effective date of filing (optional): 7. The limited liability company is a professional company, and the principal profession or professions for which members are duly licensed or otherwise legally authorized to render professional services is: Law Signature of a manager, member or authorized person. Secretary of State use only IDAHO SECRETARY OF STATE Signature 7. 10/24/2014 05:08 Typed Name: Lorin Stray McArthur CK:1091 CT:302538 BH:1446669 16 100.00 = 100.00 PROF LLC #2 Signature Typed Name:

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