



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 APR 30 AM 9:35

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Idaho Accounting Professionals LLC

2. The complete street and mailing addresses of the initial designated office:

11088 W Divide Pass Dr Boise, ID 83709

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Jon Tracy

(Name)

11088 W Divide Pass Dr Boise, ID 83709

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Jon Tracy

11088 W Divide Pass Dr Boise, ID 83709

Kortney Tracy

11088 W Divide Pass Dr Boise, ID 83709

5. Mailing address for future correspondence (annual report notices):

11088 W Divide Pass Dr Boise, ID 83709

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Jon Tracy

Typed Name: Jon Tracy

Signature

Kortney Tracy

Typed Name: Kortney Tracy

Secretary of State use only

IDAHO SECRETARY OF STATE
04/30/2012 05:00
CK: 273 CT: 230096 BH: 1322003
1 @ 100.00 = 100.00 ORGAN LLC # 2

W113510