



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JAN 26 PM 1:13

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Egerman Consulting, LLC

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

3575 N. Brookside Lane, Boise, ID 83714

(Street Address)

(Mailing Address, if different than street address)

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

Heidi A Egerman

3575 N. Brookside Lane, Boise, ID 83714

(Name)

(Street Address)

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

Name

Address

Heidi A Egerman

3575 N. Brookside Lane, Boise, ID 83714

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

same as above

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

Heidi A. Egerman

Signature

Typed Name:

Secretary of State use only

W80914

IDAHO SECRETARY OF STATE
01/26/2009 05:00
CK: 3373 CT: 233513 BH: 1154849
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