



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 NOV -7 PM 2:01

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Patricia Pence and Associates LLC

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

1214 Southside Blvd
(Street Address)

Nampa, ID 83686
(Mailing Address, if different than street address)

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

Patricia Pence
(Name)

1214 Southside Blvd
(Street Address)
Nampa, ID 83686

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

Name	Address
<u>Patricia Pence</u>	<u>1214 Southside BLVD</u>
<u></u>	<u>Nampa, ID 83686</u>
<u></u>	<u></u>
<u></u>	<u></u>
<u></u>	<u></u>

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

1214 Southside Blvd Nampa, ID 83686

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Patricia Pence
Typed Name: PATRICIA PENCE

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
11/07/2012 05:00
CK: 1013 CT: 222794 BH: 1346859
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