



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 OCT 28 AM 9:29

SECRETARY OF STATE
STATE OF IDAHO

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

Darnall and Associates, PLLC

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

2491 Pronghorn Ln, Eagle, ID 83616

(Street Address)

PO Box 2015, Eagle, ID 83616

(Mailing Address, if different than street address)

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

Jerry W. Darnall

(Name)

2491 Pronghorn Ln, Eagle, ID 83616

(Street Address)

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

Name

Address

Jerry W. Darnall

2491 Pronghorn Ln, Eagle, ID 83616

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

PO Box 2015, Eagle, ID 83616

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: _____ Attorney / LAW

Signature of an organizer(s). (An organizer is a member, or is acting in behalf of a required, and existing, initial member or members).

Signature _____

Typed Name: _____ Jerry W. Darnall

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
10/28/2009 05:00
CK: 327867 CT: 172099 BN: 1192942
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