

## CERTIFICATE OF ORGANIZATION **PROFESSIONAL** LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

11 NOV -7 AM 9: 37

(Instructions on back of application)

SECRETARY OF STATE

1.	1. The name of the professional limited liability company is: STATE OF IDAHO	
	Sherritt Law Off	ice PLLC
2.	The complete street and mailing addresses of the initial designated/principal office:  208 S. Main St., Suite 3, Moscow, ID 83843  (Street Address)  PO Box 9111, Moscow, ID 83843  (Mailing Address, if different than street address)	
3.	. The name and complete street address of the registered agent:	
	Katie M. Sherritt Edburg 208 S. Main	St., Suite 3, Moscow, ID 83843
	(Name) (Street Addre	ss)
4.	The name and address of at least one member liability company:  Name  Katie M. Sherritt Edburg  PO Box 911	or manager of the professional limited  Address  1, Moscow, ID 83843
5.	Mailing address for future correspondence (annual report notices): PO Box 9111, Moscow, ID 83843	
6.	Future effective date of filing (optional):	
7.	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	
_	nature of a manager, member or authorized	
Sig Typ	nature	Secretary of State use only
Туг	ped Name:	IDANG SECRETARY OF STATE

cert\_org\_plic.pmd Rev. 07/2010

CK: 1004 CT: 263942 BH: 1297112 1 0 180.00 = 100.00 PROF LLC # 2