

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 JUN 16 AM 10: 24

£ 60	(Instructions on back of a	pplication)	SECRETARY OF STATE
1. T	he name of the limited liability compan	ıy is:	STATE OF IDAHU
	Profi	it Circle LLC	
2. T	he complete street and mailing address	ses of the init	ial designated/principal office:
	3299 W Davis L	n - Meridian, ID	83642
	(Street Address)		
;	(Mailing Address, if different than street address)		
3. T	The name and complete street address of the registered agent:		
	Russell D Hunemiller	3299 W D	Navis Ln - Meridian ID 83642
•		reet Address)	
	he name and address of at least one m	nember or ma	nager of the limited liability
C	ompany: Name		Addesse
	Russell O flunemiller	3299 W C	
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			\$ -
5. M	lailing address for future correspondent	•	•
-	3299 W Davis Li	h - Meridian, ID	state of IDAHO initial designated/principal office: ID 83642 stered agent: W Davis Ln - Meridian ID 83642 manager of the limited liability Address W Davis Ln - Meridian ID 63642 report notices): ID 83642 Secretary of State use only 10010 SECRETARY OF Secret
3 F	uture effective date of filing (optional):		
-	atore checate date of ming (opiona).		The second secon
iana	ture of organizer(s). (An organizer is a nyem	her orie	· · · · · · · · · · · · · · · · · · ·
	in behalf of a member or members)/		
	(D. 11)7/1/1	d M	Secretary of State use only
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ypec	Name: Russell D Huhemiller	los	
Siana	turo.	.C. forms	IDANO SECRETARY OF STA
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