

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 JUL -6 PM 2: 10

SECRETARY OF STATE STATE OF IDAHO 1. The name of the limited liability company is:

	Contract Paralegal Services, LLC
The complete street and ma	iling addresses of the initial designated/principal office:
(Street Address)	
(Mailing Address, if different than street	address)
The name and complete stre	eet address of the registered agent:
JoEllen Warren	1497 N. Crosswater Way, Eagle, ID 83616
(Name)	(Street Address)
The name and address of a company:	least one member or manager of the limited liability
<u>Name</u>	<u>Address</u>
JoEllen Warren	1497 N. Crosswater Way, Eagle, ID 83616
<u> </u>	
Mailing address for future or	orrespondence (annual report notices):
1497 N. Crosswater Way, Eagle	• • • • • • • • • • • • • • • • • • • •
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Future effective date of filing	y (optional): N/A
gnature of a manager, men	nber or authorized
rson.	Secretary of State use only
gnature AWaM	J. Mager
ped Name: JoEllen Warren, Mar	nager O
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