

## ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY



|      | (Instructions on back of ap                                                                                                                                                                                                   | plication)                              | 104HO "E                     |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| 1.   | The name of the professional limited liability company is:  Porter Law Office, P. L. L. C.                                                                                                                                    |                                         |                              |
| 2.   | The professional LLC is organized for the practice in the profession of: Practicing Law                                                                                                                                       |                                         |                              |
| 3.   | The address of the initial registered office is: 3040 E. 17th Street, Suite 2, Idaho Falls, ID 8340                                                                                                                           |                                         |                              |
|      | and the name of the initial registered agent                                                                                                                                                                                  | tis: Brand                              | on Porter                    |
| 4.   | Management of the professional limited liability company will be vested in:                                                                                                                                                   |                                         |                              |
|      | ☐ Manager(s)       M                                                                                                                                                                                                          | /lember(s)                              |                              |
| 5.   | If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member. |                                         |                              |
|      | Name                                                                                                                                                                                                                          | Addres                                  | s                            |
|      | Brandon Porter                                                                                                                                                                                                                | 1055 Newgate Dr., Idaho Falls, ID 83406 |                              |
|      |                                                                                                                                                                                                                               |                                         |                              |
|      |                                                                                                                                                                                                                               |                                         |                              |
|      |                                                                                                                                                                                                                               |                                         |                              |
|      |                                                                                                                                                                                                                               |                                         |                              |
| 6. 5 | Signature(s) of at least one person responsit                                                                                                                                                                                 | ole for forming the limited             | liability company:           |
|      | Signature Sand In                                                                                                                                                                                                             |                                         |                              |
| T    | yped Name Brandon Porter                                                                                                                                                                                                      | c.p65                                   |                              |
| С    | apacity Member                                                                                                                                                                                                                | Revised 09/2002                         |                              |
| S    | ignature                                                                                                                                                                                                                      | Tts of organiza Revised 0920002         | IDANO SECRETARY OF STATE     |
|      | yped Name                                                                                                                                                                                                                     | Revise of 34                            | 1856 CT: 176124 M: 737439    |
| С    | apacity                                                                                                                                                                                                                       | 1 0                                     | 100.00 = 100.00 PROF LLC # 2 |
|      |                                                                                                                                                                                                                               |                                         |                              |

W 29726