



0004458034

**STATE OF IDAHO***Office of the secretary of state, Lawrence Denney***CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

Idaho Secretary of State

PO Box 83720

Boise, ID 83720-0080

(208) 334-2301

Filing Fee: \$100.00

*For Office Use Only***-FILED-**

File #: 0004458034

Date Filed: 10/21/2021 5:30:26 PM

| Certificate of Organization Limited Liability Company | | | | | |
|---|--|------|---------|-------------------|--|
| Select one: Standard, Expedited or Same Day Service (see descriptions below) | Standard (filing fee \$100) | | | | |
| 1. Limited Liability Company Name | | | | | |
| Type of Limited Liability Company | Limited Liability Company | | | | |
| Entity name | Idaho Legal Forms Assistance, LLC. | | | | |
| 2. The complete street address of the principal office is: | | | | | |
| Principal Office Address | JULIE HENRY 851 N. HICKORY AVE SUITE 107 MERIDAIN, ID 83642 | | | | |
| 3. The mailing address of the principal office is: | | | | | |
| Mailing Address | JULIE HENRY PO BOX 1239 MERIDIAN, ID 83680-1239 | | | | |
| 4. Registered Agent Name and Address | | | | | |
| Registered Agent | Registered Agent JULIE HENRY Physical Address: 1220 W. LEGARRETA DRIVE MERIDIAN, ID 83642 Mailing Address: JULIE HENRY PO BOX 1239 MERIDIAN, ID 83680-1239 | | | | |
| <input checked="" type="checkbox"/> I affirm that the registered agent appointed has consented to serve as registered agent for this entity. | | | | | |
| 5. Governors | | | | | |
| <table border="1"><thead><tr><th>Name</th><th>Address</th></tr></thead><tbody><tr><td>JULIE BLACK-HENRY</td><td>PO BOX 1239 MERIDIAN, ID 83680-1239</td></tr></tbody></table> | | Name | Address | JULIE BLACK-HENRY | PO BOX 1239 MERIDIAN, ID 83680-1239 |
| Name | Address | | | | |
| JULIE BLACK-HENRY | PO BOX 1239 MERIDIAN, ID 83680-1239 | | | | |
| Signature of Organizer: | | | | | |
| <u>JULIE HENRY</u> | <u>10/21/2021</u> | | | | |
| Sign Here | Date | | | | |

B0656-8840 10/21/2021 5:38 PM Received by ID Secretary of State Lawrence Denney