



**CERTIFICATE OF ORGANIZATION
PROFESSIONAL
LIMITED LIABILITY COMPANY**

**FILED EFFECTIVE
10 MAR 11 PM 1:24**

(Instructions on back of application)

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the professional limited liability company is:

John Marshall Law PLLC

2. The complete street and mailing addresses of the initial designated/principal office:

575 W Bannock, Boise, ID 83702

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

John Marshall

575 W Bannock, Boise, ID 83702

(Name)

(Street Address)

4. The name and address of at least one member or manager of the professional limited liability company:

Name

John Marshall

Address

575 W Bannock, Boise, ID 83702

5. Mailing address for future correspondence (annual report notices):

575 W Bannock, Boise, Idaho, 83702

6. Future effective date of filing (optional): _____

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

Signature of an organizer(s). (An organizer is a member, or is acting in behalf of a required, and existing, initial member or members).

Signature John Marshall

Typed Name: John M. Marshall

Signature _____

Typed Name: _____

Secretary of State use only

Form LLC-1000-000
Revised 07/2008

W 91436
IDaho SECRETARY OF STATE
03/11/2010 05:00
CK: 400993 CT: 172899 BH: 1212257
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