## ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY



<u> </u>	liability company is: Richardson & O'Leary
of: Law	pany is organized for the practice of the profession
The address of the initial registered o	office is 99 East State Street,
Suite 200, Eagle, Idaho 83	,
initial registered agent at that addres	
Signature of registered agent:	+ Reary
Signature of registered agent.	X The state of the
,	
	V
<u> </u>	company vested in a manager or managers?
☐ Yes	No (check appropriate box)
☐ Yes  If management is vested in one or mo	ore manager(s), list the name(s) and address(es)
☐ Yes  If management is vested in one or mo	ore manager(s), list the name(s) and address(es)
If management is vested in one or moleast one initial manager. If manager	
If management is vested in one or moleast one initial manager. If manager address(es) of at least one member.	No (check appropriate box)  ore manager(s), list the name(s) and address(es) or ment is vested in the members, list the name(s) and
If management is vested in one or moleast one initial manager. If manager address(es) of at least one member.  Name:	No (check appropriate box)  ore manager(s), list the name(s) and address(es) or ment is vested in the members, list the name(s) an   Address:
If management is vested in one or moleast one initial manager. If manager address(es) of at least one member.  Name:	No (check appropriate box)  ore manager(s), list the name(s) and address(es) of ment is vested in the members, list the name(s) and Address:  99 East State Street
If management is vested in one or moleast one initial manager. If manager address(es) of at least one member.  Name:  Peter J. Richardson	No (check appropriate box)  ore manager(s), list the name(s) and address(es) of ment is vested in the members, list the name(s) and Address:  Address:  99 East State Street  Suite 200, Eagle, Idaho 83616
If management is vested in one or moleast one initial manager. If manager address(es) of at least one member.  Name:	No (check appropriate box)  ore manager(s), list the name(s) and address(es) of ment is vested in the members, list the name(s) an   Address:  99 East State Street
If management is vested in one or moleast one initial manager. If manager address(es) of at least one member.  Name:  Peter J. Richardson	ore manager(s), list the name(s) and address(es) of ment is vested in the members, list the name(s) and Address:

CK: 3361 CT: 124207 BH: 274672

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