



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

10 MAY 14 PM 4:41

SECRETARY OF STATE
STATE OF IDAHO

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

Modus Architecture Collaborative PLLC

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

242 N. 8th Street, Suite 220, Boise, ID 83702

(Street Address)

(Mailing Address, if different than street address)

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

Bruce E. Poe

(Name)

242 N. 8th Street, Suite 220, Boise, ID 83702

(Street Address)

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

Name

Address

Bruce E. Poe

2034 S. Ridge Point Way, Boise, ID 83712

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

Bruce E. Poe, 2034 S. Ridge Point Way, Boise, ID 83712

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: _____ Architecture

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

Typed Name:

Bruce E. Poe

Signature

Typed Name:

Secretary of State use only

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IDAHO SECRETARY OF STATE
05/17/2010 05:00
CK: 8719 CT: 217314 BH: 1222421
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