



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

West Wealth Management LLC

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

2484 N Stokesberry PL Ste 150

(Street Address)

Meridian, ID 83646

(Mailing Address, if different than street address)

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

Sean C West

(Name)

2505 N Snow Hawk Kuna, ID 83634

(Street Address)

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

Name

Sean C West

Address

2505 N Snow Hawk Kuna, ID 83634

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

2484 N Stokesberry Pl Ste 150 Meridian, ID 83634

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Sean C West

Secretary of State use only

Signature _____

Typed Name: _____

IDAHO SECRETARY OF STATE
04/26/2013 05:00
CK: 1069 CT: 282465 BH: 1371482
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