

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

SECRETARY OF STATE

(Instructions on back of application)

The name of	the limited	liability company	is:

	mited liability company is:	STATE OF IDAHO			
LM Bookkeeping Ser	rvices, LLC	•			
The complete street and mailing addresses of the initial designated office: 3210 N 45th E Idaho Falls, ID 83401					
(Street Address)					
(Mailing Address, if different than street address)					
. The name and com	The name and complete street address of the registered agent:				
Amy Lake	3210 N 45th E Ida	ho Falls, ID 83401			
(Name)	(Street Address)				
. The name and add company:	The name and address of at least one member or manager of the limited liability company:				
Na	me	Address			
Amy Lake	3210 N 45th E Ida	ho Falls, ID 83401			
		·			
					
	•				
. Mailing address for 3210 N 45th E Idaho	future correspondence (annual re Falls, ID 83401	port notices):			
3210 N 45th E Idaho					
3210 N 45th E Idaho	Falls, ID 83401				
3210 N 45th E Idaho Future effective date ignature of a manage	Falls, ID 83401				
3210 N 45th E Idaho Future effective dat	Falls, ID 83401 te of filing (optional):				

1DANO SECRETARY OF STATE . 05/04/2015 05:00

CK: 2620 CT: 309762 BH: 1473786 10 100.00 = 100.00 ORGAN LLC #2 10 20.00 = 20.00 EXPEDITE C #3

W151094

Typed Name: Amy Lake

Signature__

Typed Name: _