



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE PROFESSIONAL LIMITED LIABILITY COMPANY

2013 AUG 30 AM 9:02

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the professional limited liability company is: Pluid Law, PLLC
2. The complete street and mailing addresses of the initial designated office:
1489 District Two Rd., Bonners Ferry, ID 83805
(Street Address)
P.O. Box 1512, Bonners Ferry, ID 83805
(Mailing Address, if different than street address)
3. The name and complete street address of the registered agent:

Andrakay Pluid
(Name)1489 District Two Rd, Bonners Ferry, ID
(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Andrakay Pluid</u>	<u>1489 District Two Rd, Bonners Ferry, ID</u>
_____	_____
_____	_____
_____	_____

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

P.O. Box 1512, Bonners Ferry, ID 83805

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 a manager, member or authorized person.

Signature

Typed Name: Andrakay Pluid

Signature _____

Typed Name: _____

Secretary of State use only

Contact #: 208-946-7598

 IDAHO SECRETARY OF STATE
 08/30/2013 05:00
 CK: 1424 CT: 287835 IN: 1388264
 1 @ 100.00 = 100.00 PROF LLC # 2

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