

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

2014 MAY -6 PM 1: 08 SECRETARY OF STATE STATE OF TOAHO

(Instructions on	back of application)	- 107/110
1. The name of the professional	limited liability comp	pany is:
	Handel Courtroom Pl	TC
2. The complete street and mailing	ng addresses of the	initial designated office:
1489 E. Handel Ct., Meridian, ID 8	33646	
(Street Address)		
(Mailing Address, if different than street a	ddress)	
3. The name and complete stree	t address of the regi	stered agent:
Jared Walker	1489 E. Handel Ct., Meridian, ID 83646	
(Name)	(Street Address)	
liability company:	east one member or	manager of the professional limited
Name	4400 E 11	Address
Jared Walker Steven Richardson	1489 E. Handel Ct., Meridian, ID 83646 1577 E. Handel Ct., Meridian, ID 83646	
5. Mailing address for future corn 1489 E. Handel Ct., Meridian, ID 8	• ` `	report notices):
6. Future effective date of filing (optional):	
· · · · · · · · · · · · · · · · · · ·	•	pany, and the principal profession or otherwise legally authorized to render
Signature of a manager, member	er or authorized	
1 00.7		Secretary of State use only
Signature WWW dule		IDAHO SECRETARY OF STATE
Typed Name: Jared Walker		05/06/2014 05:00 CK:CASH CT:296547 BH:142355
Signature		10 100.00 = 100.00 PROF LLC
Typed Name:		

W137562