

Signature

Typed Name

Mark F. Holmstead

AMENDMENT TO CERTIFICATE OF ORGANIZATION 12 AM 8: 18 LIMITED LIABILITY COMPANY SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

(msuc	ictions on back of application)	-
The name of the limit	ited liability company is:	
	Holmstead Howe, PLLC	
The name of the lim	ited liability company is amended to	read:
	Holmstead, Howe & Heward, P	PLLC
The date the certific	ate of organization was originally file	d:9/6/2011
The complete street amended to:	and mailing addresses of the design	nated principal office is
4	01 Gooding Street North Ste. #203, Twin F	Falls, Idaho 83301
The mailing address	s for future correspondence (annual r	reports) is amended to:
	PO Box 1293, Twin Falls, Idaho 83	303-1293
The name and addre	ess of the managers/members shall l Address	be amended as follows: Add Delete Other
Jared C. Heward	PO Box 1293, Twin Falls, ID 83303	
Signature of an auth	orized person	
Shawna M.		
oture Shawna M. Howe		Secretary of State use only
dName Mint of M		IDAHO SECRETARY OF STA 06/12/2015 05:0

amend_domestic_LLC.pmd Rev.07/2010

CK:3083 CT:277379 BH:1479573 1@ 30.00 = 30.00 ORGAN AMEN #2

W106434