CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2017.0CT 18 AM 8: 54 SECRETARY OF

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplicate.

	•		STATE OF ICAHOTE
1.	The name of the professional limited liability company is:		
-	Lisa M. Schoettger - PLLC		
2.	The complete street and mailing addresses of the principal office is: 780 Eastland Dr., Twin Falls, ID 83301		
	(Street Address)		
	PO Box 487, Twin Falls, ID 83303		
	(Mailing Address, if different)		
3.	Name and street address of registered agent <u>in Idaho</u> :		
	Lisa M. Schoettger	780 Eastland Dr.	, Twin Falls, ID 83301
	(Name)	(Address)	
4.	The name and address of at least one governor of the limited liability company:		
	Lisa M. Schoettger	780 Eastland Dr.	, Twin Falls, ID 83301
	(Name)	(Address)	
	(Name)	(Address)	<u> </u>
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	Lisa M. Schoettger, PO Box 487, Twin Falls, ID 83303		
	(Address)		
6.	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:		
	L	aw	
			Secretary of State use only
7.	Signature of a manager, mem	ber, or an organizer.	IDAHO SECRETARY OF STATE
	Lisa M. Schoettger	•	10/18/2017 05:00

Printed Name:

Signature:

Printed Name:

Signature:. Rev. 08/2015

CK:5089 CT:173752 BH:1607843 10 100.00 = 100.00 PROF LLC #2 1@ 20.00 = 20.00 EXPEDITE C #3

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