

## CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

11 JUN -3 AM 9: 10

(Instructions on back of application)

1.	The name of the professional limite	
	Ma	eser Law Office PLLC
2.	2. The complete street and mailing addresses of the initial designated/principal office:	
	2550 Ross Avenue, Idaho Falls, ID 8340 (Street Address)	6
	(Mailing Address, if different than street address)	
3.	3. The name and complete street address of the registered agent:	
	Greg Maeser	2550 Ross Avenue, Idaho Falls, ID 83406
	(Name)	(Street Address)
	liability company:  Name  Greg Maeser	Address  2550 Ross Avenue, Idaho Falls, ID 83406
5.	Mailing address for future correspo 2550 Ross Avenue, Idaho Falls, ID 83406	, ,
6.	Future effective date of filing (option	nal):
7.	• • • •	rofessional company, and the principal profession or duly licensed or otherwise legally authorized to render ses
-	nature of a manager, member or	
-	nature SM alven	Secretary of State use only
	ed Name: Greg Maeser	
Signature		
Typed Name:		06/03/2011 05:00 CK: 2468 CT: 112554 DH: 1276753 1 0 100.00 = 100.00 PROF LLC \$ 2

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