



# CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**

09 NOV 24 PM 1:03

SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

1. The name of the professional limited liability company is:

LAW OFFICES OF KAAREN L. Barr, PLLC

2. The complete street and mailing addresses of the initial designated/principal office:

107 N Hayes, Emmett, ID 83617

(Street Address)

PO Box 774, Emmett, ID 84617

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Kaaren L. Barr

107 N Hayes, Emmett, ID 83617

(Name)

(Street Address)

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

**Name**

**Address**

Kaaren L. Barr

107 N Hayes, Emmett, ID 83617

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

PO Box 774, Emmett, ID 83617

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 an organizer(s). (An organizer is a member, or is acting in behalf of a required, and existing, initial member or members).

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Kaaren Barr

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE  
 11/24/2009 05:00  
 CK: 7515 CT: 242351 BH: 1196762  
 1 @ 100.00 = 100.00 PROF LLC # 2  
 1 @ 20.00 = 20.00 EXPEDITE C # 3

W 8536