

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY_{07 SEP 17 AM 9: 38 -}

(Instructions on back of application)

SECRETARY OF STATE

			STATE OF IDAHO	
1.	The name of the limited liability com	pany is:		
	Grace Financial Planning, LLC			
2. The street address of the initial registered office is:				
	306 N. Spokane St., Suite F, Post F	306 N. Spokane St., Suite F, Post Falls, ID 83854		
	and the name of the initial registered Rex A. Grace	agent at the a	above address is:	
3.	The mailing address for future correspondence is: 306 N. Spokane St Suite F, Post Falls, ID 83854			
4.	The limited liability company will be:			
	Manager-managed 🗸 or Member	-managed	(please check the appropriate box)	
5.	If manager-managed, list the name(s) and address(es) of at least one initial manager. If member-managed, list the name(s) and address(es) of at least one initial member.			
	<u>Name</u>		Address	
	Rex A. Grace	306 N. Spok	ane St Suite F, Post Falls, ID 836	
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6. Signature of at least one person responsible for forming the limited			rming the limited liability company:	
	Signature:	<u> </u>	Secretary of State use only	
	Typed Name: Rex A. Grace			
	Capacity: Manager			
	Signature		25202	
	Signature Typed Name:		IDAHO SECRETARY OF STATE 69/17/2007 05:00	
	Capacity:		1 9 186.42 = 188.46 DRGN HIT #	
			Web Form	

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