



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE
2015 MAR -4 AM 10: 28
**SECRETARY OF STATE
STATE OF IDAHO**

(Instructions on back of application)

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

Shaver Law, PLLC

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

1515 Shenandoah Dr.

(Street Address)

Boise, ID 83712

(Mailing Address, if different than street address)

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

Robert L. Shaver

(Name)

1515 Shenandoah Dr., Boise, ID 83712

(Street Address)

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

Name
Address
Robert L. Shaver
1515 Shenandoah Dr., Boise, ID 83712

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

1515 Shenandoah Dr., Boise, ID 83712

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 (Attorney at Law)

Signature of a manager, member or authorized person.

Signature

Robert L. Shaver

 Typed Name: Robert L. Shaver

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

03/04/2015 05:00
CK: CASH CT: 307223 BH: 1464547
1@ 100.00 = 100.00 PROF LLC #2

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