

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

2014 APR -1 PM 3: 42

SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

	1780 S. Watersilk Place, Boise, ID 83 (Street Address) Same (Mailing Address, if different than street address) The name and complete street address.	ess)	
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3.	(Street Address) Same (Mailing Address, if different than street address) The name and complete street address	ess)	
3.	(Mailing Address, if different than street address.) The name and complete street address.		
3.	·	ddress of the registered agent:	
		The name and complete street address of the registered agent:	
	William Pigott	1780 S. Watersilk Place, Boise, ID 83709	
	(Name)	(Street Address)	
	The name and address of at least liability company: Name William Pigott	Address 1780 S. Watersilk Place, Boise, ID 83709	
5.	Mailing address for future corres	•	
6.	Future effective date of filing (opt	tional): N/A	
7.		professional company, and the principal profession or reduly licensed or otherwise legally authorized to render	
	nature of a manager, member	or authorized	
-			
pers	nature W	Secretary of State use only	
pers	nature W	Secretary of State use only	
Sign Type	rson.		

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