

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

10 SEP 21 AM 9: 12

(Instructions on back of application)

STATE OF IDAHO

1. The name of the limited lia	bility company is:
Unli	mited Tax Solutions, LLC
2. The complete street and m	ailing addresses of the initial designated/principal office:
9527 W Sunflower Lane	·
(Street Address) Boise, ID 83704	
(Mailing Address, if different than stre	et address)
3. The name and complete st	reet address of the registered agent:
Emily J Call	9527 W Sunflower Lane, Boise ID 83704
(Name)	(Street Address)
company: Name	at least one member or manager of the limited liability Address
Travis D Call	9527 W Sunflower Lane, Boise ID 83704
-	correspondence (annual report notices):
9527 W Sunflower Lane, Bois	: ID 83704
6. Future effective date of filion	ng (optional):
ignature of a manager, me erson.	
ignature Emilia Cal	Secretary of State use only
yped Name: Emily J ©all	·
Signature Trans	IDAHO SECRETARY OF STATE 09/21/2010 05:00 CK: 201 CT: 251423 BH: 1239817
Typed Name: Travis D Call	1 9 100.00 = 100.00 ORGAN LLC #

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