

CERTIFICATE OF ORGANIZATION

PROFESS LIMITED LIABIL	- - -	2013 FEB 27 AM 8: 22
(Instructions on bac	ck of application)	SECRETARY OF STATE STATE OF IDAHO
1. The name of the professional limi	ted liability company is:	
	Eric L. Haff, PLLC	
2. The complete street and mailing a	ddresses of the initial de	signated office:
209 West Main Street, Boise, Idaho 83	702	
(Street Address) PO Box 139, Boise, Idaho 83701		
(Mailing Address, if different than street address	3)	· - · · · · · · · · · · · · · · · · · ·
3. The name and complete street ad-	dress of the registered a	gent:
Eric L. Haff	209 West Main Street, Boise, Idaho 83702 (Street Address)	
(Name)		
Name Eric L. Haff	2713 Inverness Way, Boi	Address se, Idaho 83705
5. Mailing address for future corresponders C/o Eric L. Haff, PO Box 139, Boise, Ida		notices):
6. Future effective date of filing (option	onal):	AA 1- şayındır.
7. The limited liability company is a professions for which members are professional services is: Practice of	duly licensed or otherwis	• •
Signature of a manager, member o person.	r authorized	
		Secretary of State use only
Signature		
Typed Name: Eric L. Haff - Sole Member		
Signature		IDAHO SECRETARY OF STATE 02/27/2013 05:00
Typed Name:		CK: 29448 CT: 15879 BH: 1361994 1 0 100.00 = 100.00 PROF LLC # 1

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