

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE **PROFESSIONAL** LIMITED LIABILITY COMPANY

12 FEB 24 AM 8:5

SECRETARY OF STATE

	(Instructions on back of application)	
1.	The name of the professional limit	ited liability company is:
	Consur	ner Attorneys of Idaho, PLLC
2.	The complete street and mailing addresses of the initial designated office:	
	212 10th Avenue South, Nampa, Idaho 83651	
	(Street Address)	
	PO Box 9626, Boise, Idaho 83707 (Mailing Address, if different than street address	
3.	The name and complete street address of the registered agent:	
	Ryan T. Earl	212 10th Avenue South, Nampa, Idaho 83651
	(Name)	(Street Address)
4.	The name and address of at least one member or manager of the professional limited	
	liability company:	
	Name	<u>Address</u>
	Ryan T. Earl	212 10th Avenue South, Nampa, Idaho 83651
5 .	Mailing address for future correspondence (annual report notices):	
	PO Box 9626, Boise, Idaho 83707	,
6	Future effective date of filing (opti	onal):
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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: Attorneys	at Law
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per	son. V// \(\)	Secretary of State use only
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Sig	nature // /	
Тур	ed Name Ryan T. Earl	
Sig	nature	IDANO SECRETARY OF STATE
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02/24/2012 @5:00 CK: 1105 CT: 256168 BH: 1312095 1 0 100.08 = 198.00 PROF LLC # 2 1 0 26.00 = 20.00 EXPEDITE C # 3

Typed Name: ____