



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

FILED EFFECTIVE

10 AUG -2 AM 9:21

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

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

Law Office of Justin Jolley PLLC

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

623 Britton Lane, Moscow, Idaho 83843

(Street Address)

P.O. Box 9749, Moscow, Idaho 83843

(Mailing Address, if different than street address)

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

Justin R. Jolley

(Name)

623 Britton Lane, Moscow, Idaho 83843

(Street Address)

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

Name

Address

Justin R. Jolley

623 Britton Lane, Moscow, Idaho 83843

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

Law Office of Justin Jolley PLLC, P.O. Box 9749, Moscow, Idaho 83843

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Justin R. Jolley

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/02/2010 05:00
CK: 2713 CT: 250089 BH: 1233055
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