



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2014 MAY -9 PM 12:24

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Lake Forensic Advisors, LLC

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

2830 Derby Place, Boise, ID 83709

(Street Address)

PO Box 190496, Boise, ID 83719

(Mailing Address, if different than street address)

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

Les Lake

(Name)

2830 Derby Place, Boise, ID 83709

(Street Address)

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

NameAddress

Les Lake

2830 Derby Place, Boise, ID 83709

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

PO Box 190496, Boise, ID 83719

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Les LakeTyped Name: Member

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

05/09/2014 05:00

CK:5487 CT:198223 BH:1424078

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