

ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

2005 DEC 29 AM 8: 32

SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application) The name of the professional limited liability company is: Casper Law Office, PLLC 2. The professional LLC is organized for the practice in the profession of: 3. The address of the initial registered office is: 330 Shoup Avenue, Third Floor, Idaho Falls, ID 83402 and the name of the initial registered agent is: _____ Thel W. Casper, Esq. 4. Management of the professional limited liability company will be vested in: ☐ Manager(s) ☑ Member(s) 5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one manager. If management is to be vested in members, list the name(s) and address(es) of at least one initial member. Name Address Thel W. Casper, Esq. PO Box 51298, Idaho Falls, ID 83405 6. Signature(s) of at least one person responsible for forming the limited liability company: Signature ___ Thel W. Casper, Esq. Typed Name ____ Member Capacity

Signature _____

Typed Name _____

Capacity ____

W45 897

IDAHO SECRETARY OF STATE 12/29/2005 05:00 CK: 2140 CT: 183306 RH: 929137 1 @ 100.00 = 100.00 PROF LLC # 2