



# **CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY**

**FILED**

2013 DEC 27 AM 8:33

 SECRETARY OF STATE  
STATE OF IDAHO

(Instructions on back of application)

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

Allen Accounting Group PLLC

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

533 Main Street, Salmon ID 83467

(Street Address)

(Mailing Address, if different than street address)

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

Ryan Allen

(Name)

533 Main Street, Salmon ID 83467

(Street Address)

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

**Name**
**Address**
Ryan Allen
17 Stormrider Road, Salmon ID 83467
Cori Allen
17 Stormrider Road, Salmon ID 83467

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

PO Box 1227, Salmon ID 83467

6. Future effective date of filing (optional): January 1, 2014

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: Certified Public Accountancy

Signature of a manager, member or authorized person.

 Signature *Ryan Allen*

 Typed Name: Ryan Allen

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

 IDAHO SECRETARY OF STATE  
 12/27/2013 05:00  
 CK: 10605 CT: 258605 BH: 1483224  
 1 @ 100.00 = 100.00 PROF LLC # 2  
 1 @ 20.00 = 20.00 EXPEDITE C # 3

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