

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

11 FED -2 PN 3:35

STATE OF IDANO

(Instructions on back of application)

l. The r	name of the professional lin	
	J	Jeff McDonough CPA, PLLC
2. The c	complete street and mailing	g addresses of the initial designated/principal office:
1036	69 W Emerald St, Suite 100, Bois	ise, ID 83704
(Stre	et Address)	
(Mail	ing Address, if different than street addr	ress)
B. The r	name and complete street a	address of the registered agent:
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Jeff I	McDonough	10369 W Emerald St, Suite 100, Boise, ID 83704
(Nan	ne)	(Street Address)
liabilit	y company: <u>Name</u>	ast one member or manager of the professional limited <u>Address</u>
Jeff I	McDonough	10369 W Emerald St, Suite 100, Boise, ID 83704
	-	spondence (annual report notices): se. ID 83704
	ng address for future corres 9 W Emerald St, Suite 100, Bois	
1036	-	se, ID 83704
1036 Future The I profes	9 W Emerald St, Suite 100, Bois e effective date of filing (op imited liability company is a	se, ID 83704 ptional): a professional company, and the principal profession or are duly licensed or otherwise legally authorized to render
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