CERTIFICATE OF ORGANIZATION PROFESSIONAL IMITED LIABILITY COMPANY (Instructions on back of application) (Instructions on back of application) (Instructions on back of application) The name of the professional limited liability company is: <u>Wilson Law Group, PLLC</u> The complete street and mailing addresses of the initial designated/principal office: 1879 N. Firebrick Dr., Kuna Idaho 83834 (Street Address) The name and address of at least one member or manager of the professional limited liability company: <u>Name Address Jeffrey S. Wilson The name and address of at least one member or manager of the professional limited liability company: <u>Name Address Jeffrey S. Wilson The name and address of at least one member or manager of the professional limited liability company: <u>Name Address Jeffrey S. Wilson The name and address of at least one member or manager of the professional limited liability company: <u>Name Jeffrey S. Wilson The name and address of at least one member or manager of the professional limited liability company: <u>Name Jeffrey S. Wilson The name and address of at least one member or manager of the professional limited liability company: <u>Name Jeffrey S. Wilson The name and address of at least one member or manager of the professional limited liability company: <u>Name Jeffrey S. Wilson The Imited (lability company is a professional company, and the principal profession or professional services is: <u>Imited members Jeffrey S. Wilson <u>Jeffrey S. Wilson Jeffrey S. Wilson <u>Imited member Jeffrey S. Wilson <u>Imited member Jeffrey S. Wilson <u>Jeffrey S. Wilson Jeffrey S. Wilson <u>Jeffrey S. Wilson Jeffrey S. Wilson <u>Jeffrey S. Wilson Jeffrey S. Wilson <u>Jeffr</u></u></u></u></u></u></u></u></u></u></u></u></u></u></u>			·				
Wilson Law Group, PLLC 2. The complete street and mailing addresses of the initial designated/principal office: 1879 N. Firebrick Dr., Kuna Idaho 83634 (Street Address) 3. The name and complete street address) 3. The name and address of at least one member or manager of the professional limited liability company: <u>/ufme</u>) <u>/street Address</u> <u>Jeffrey S. Wilson (Street Address) 4. The name and address of at least one member or manager of the professional limited liability company: <u>Nama</u> <u>Address</u> <u>Jeffrey S. Wilson 1879 N. Firebrick Dr., Kuna Idaho 83634 <u>1 </u> </u></u>		PROFES	SIONAL		09 NOV -5 AM 8: 13		
The complete street and mailing addresses of the initial designated/principal office:	1.	The name of the professional lim	ited liability com	ipany is:	STATE OF IDAHO		
1879 N. Firebrick Dr., Kuna Idaho 83634 (Mailing Address) 3. The name and complete street address of the registered agent:		W	/ilson Law Group, F	PLLC			
(Mailing Address, if different than above address) 3. The name and complete street address of the registered agent:	2.						
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3. The name and complete street address of the registered agent: Jeffrey S. Wilson 1879 N. Firebrick Dr., Kuna Idaho (Name) (Street Address) 4. The name and address of at least one member or manager of the professional limited liability company: Address Nama Address Jeffrey S. Wilson 1879 N. Firebrick Dr., Kuna Idaho 83634 Jeffrey S. Wilson 1879 N. Firebrick Dr., Kuna Idaho 83634 Jeffrey S. Wilson 1879 N. Firebrick Dr., Kuna Idaho 83634 Statistic address for future correspondence (annual report notices): 1879 N. Firebrick Dr., Kuna Idaho 83634 6. Future effective date of filing (optional):		Mailing Address if different then street address			`]		
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1879 N. Firebrick Dr., Kuna Idaho 83634 6. Future effective date of filing (optional): 7. The limited flability 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: Signature of an organizer(s). (An organizer is a member, or is acting in behalf of a required, and existing, initial member or members). Signature							
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