

FILED EFFECTIVE



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 APR 23 AM 8:50

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

CENTERPOINT CAPITAL ADVISORS LLC

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

538 C PHEASANT RIDGE DR CHUBBUCK ID 83202

(Street Address)

PO BOX 2986 POCATELLO ID 83206

(Mailing Address, if different than street address)

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

JOEL PHILLIPS

(Name)

538 C PHEASANT RIDGE DR CHUBBUCK ID 83202

(Street Address)

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

**Name****Address**

JOEL PHILLIPS

538 C PHEASANT RIDGE DR CHUBBUCK ID 83202

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

PO BOX 2986 POCATELLO ID 83206

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

JOEL PHILLIPS

Signature

Typed Name:

Secretary of State use only

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Revised 07/2008
 IDAHO SECRETARY OF STATE  
 04/23/2009 05:00  
 CK: 1861 CT: 180922 BN: 1167243  
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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