



ARTICLES OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2004 APR 21 AM 8:35
STATE OF IDAHO
2004 APR 14 AM 8:50
STATE OF IDAHO

1. The name of the professional limited liability company is:
John Simmons JD, LLM Professional Company

2. The professional LLC is organized for the practice in the profession of: Law

3. The address of the initial registered office is: 796 Memorial Drive, Idaho Falls, Idaho 83402
and the name of the initial registered agent is: John Simmons

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
<u>John Simmons</u>	<u>796 Memorial Drive, Idaho Falls, Idaho 83402</u>
_____	_____
_____	_____
_____	_____
_____	_____

6. Signature(s) of at least one person responsible for forming the limited liability company:

Signature
Typed Name John Simmons
Capacity Manager

Signature _____
Typed Name _____
Capacity _____

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Revised 09/2002

W30079
IDAHO SECRETARY OF STATE
04/21/2004 05:00
CK: 1783 CT: 174153 BH: 740468
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