

CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY 1 JAN 11 AM 8: 15

FILED EFFECTIVE

(Instructions on back of application)

	(Instructions on back of application)		SEURE BY OF STATE
1.	The name of the professional limited	I liability company is:	STATE OF IDAHO
		EPCPA PLLC	
2.	The complete street and mailing addresses of the initial designated/principal office:		
	424 N EVER AFTER WAY, EAGLE, ID 83616		
	(Street Address) SAME		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	GERY EDSON	250 S 5TH STREET SUITE 820,	, BOISE, ID 83702
	(Name)	(Street Address)	
	liability company: Name EMMETT C PRICE	Address 424 N EVER AFTER WAY, EAG	LE, ID 83616
5.	Mailing address for future correspondence (annual report notices): 424 N EVER AFTER WAY, EAGLE, ID 83616		
6.	Future effective date of filing (options	al):	
Sig	The limited liability company is a proprofessions for which members are duprofessional services is: ACCOUNTANT	lly licensed or otherwise legal	
per	son.	Secre	tary of State use only
Ci~	nature 5		
•			
	ed Name: EMMETT C PRICE	I	DANO SECRETARY OF STATE
	nature	PV: Ti	11/2011 05:00 839 CT: 98833 BH: 1254875
Тур	ed Name:	1 5 18	e.su = 188.86 PKUF 110 # 2
			W99528
	cert_org_p	lic.pmd Rev. 07/2010	NIIN