



CERTIFICATE OF ORGANIZATION PROFESSIONAL LIMITED LIABILITY COMPANY

12 FEB -1 AM 8:41

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the professional limited liability company is:

GinFin, PLLC

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

85 Bergeson Drive, Blackfoot, ID 83221

(Street Address)

(Mailing Address, if different than street address)

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

Ginette Manwaring

(Name)

85 Bergeson Drive, Blackfoot, ID 83221

(Street Address)

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

Name

Address

Ginette Manwaring

85 Bergeson Drive, Blackfoot, ID 83221

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

85 Bergeson Drive, Blackfoot, ID 83221

6. Future effective date of filing (optional): _____

7. The limited liability 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: certified public accountancy

Signature of a manager, member or authorized person.

Signature *Ginette Manwaring* attorney for

Typed Name: Ginette Manwaring, C.P.A.

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/01/2012 05:00
CK: 892379 CT: 172099 BH: 1386717
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