



# ARTICLES OF AMENDMENT TO FILED EFFECTIVE ARTICLES OF ORGANIZATION 07 JAN -5 PM 4:48 LIMITED LIABILITY COMPANY SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

1. The name of the limited liability company is:

Gestrin, Smith & Coelho of Valley County, LLC

If the LLC has been administratively dissolved and the name is no longer available for use, #3 below must include an amendment of name.

2. The date the articles of organization were filed was:

July 18, 2005

### COMPLETE ONLY THE APPLICABLE ITEMS

3. The name of the limited liability company is amended to read:

Smith & Coelho of Valley County, LLC

4. The management of the limited liability company shall henceforth be vested in:

Manager(s)       Members

5. The information on the managers/members shall be amended as follows:

<u>Name</u>	<u>Address</u>	<u>Add</u>	<u>Delete</u>	<u>Other</u>
<u>Barb Gestrin</u>	<u>172 S. Academy</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>                    </u>
<u>Steve Smith</u>	<u>1151 E. Iron Eagle Dr.</u> <u>Eagle, ID 83616</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>                    </u>
<u>                    </u>	<u>                    </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u>                    </u>
<u>                    </u>	<u>                    </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u>                    </u>
<u>                    </u>	<u>                    </u>	<input type="checkbox"/>	<input type="checkbox"/>	<u>                    </u>

6. Signature of at least one manager, if any, or at least one member.

Signature: *Steve Smith*

Typed Name: Steve Smith

Capacity: Authorized Manager

Signature: \_\_\_\_\_

Typed Name: \_\_\_\_\_

Capacity: \_\_\_\_\_

Secretary of State use only

g:\corp\forms\ic\_forms\amend\_domestic.ic.pmd  
Revised 08/2004

IDAHO SECRETARY OF STATE  
01/08/2007 05:00  
CK: 48955 CT: 1626 BH: 1024387  
1 @ 30.00 = 30.00 ORGAN AMEN # 4

Web Form

W 41229