



# STATE OF ALABAMA

## DOMESTIC LIMITED LIABILITY COMPANY (LLC) CERTIFICATE OF FORMATION



20200227000077180 1/3 \$166.00  
Shelby Cnty Judge of Probate, AL  
02/27/2020 11:44:01 AM FILED/CERT

**(FOR COUNTY PROBATE OFFICE USE ONLY)**

1. THE NAME OF THE LIMITED LIABILITY COMPANY

**Law Office of Kierra Rumph Irby LLC**

2. THIS FORM WAS PREPARED BY:

**Kierra Rumph Irby**

3. THE NAME AND STREET (NO PO BOXES) ADDRESS OF THE REGISTERED AGENT LOCATED AT THE REGISTERED OFFICE (MUST BE LOCATED IN ALABAMA):

**Kierra R Irby  
408 Spring Crossing Drive  
Columbiana, AL 35051  
SHELBY**

MAILING ADDRESS IN ALABAMA OF REGISTERED OFFICE (IF DIFFERENT FROM STREET ADDRESS):

**PO BOX 1293  
Columbiana AL, 35051**

4. THE UNDERSIGNED CERTIFY THAT THERE IS AT LEAST ONE MEMBER OF THE LIMITED LIABILITY COMPANY.

5. CHECK ONLY IF THE TYPE APPLIES TO THE LIMITED LIABILITY COMPANY BEING FORMED:

NON-PROFIT LLC

NON-PROFIT SERIES LLC

PROFESSIONAL SERIES LLC

PROFESSIONAL LLC COMPLYING WITH TITLE 10A, CHAPTER 5A, ARTICLE 8

SERIES LLC COMPLYING WITH TITLE 10A, CHAPTER 5A, ARTICLE 11

**(FOR SOS OFFICE USE ONLY)**



\*20200210000027016\*

6. THE UNDERSIGNED SPECIFY 02/10/2020 23:32:08 AS THE EFFECTIVE DATE AND THE TIME OF FILING

ATTACHED ARE ANY OTHER MATTERS THE MEMBERS DETERMINE TO INCLUDE HEREIN

7. ORGANIZER(S) - OPTIONAL

Not Applicable

02/10/2020

DATE

Kierra Rumph Irby Attorney

ELECTRONIC SIGNATURE & TITLE



