

CERTIFICATE OF ORGANIZATION 10 AUG 10 AM 8: 07 LIMITED LIABILITY COMPANY

SECRETARY OF STATE

	(Instructions on bac	k of application)	STATE OF IDAHO
1. The na	ame of the limited liability co	mpany is:	
		AR Konsulling LLC	
2. The co	omplete street and mailing a Knoll Drive, Eagle, Idaho 83616	ddresses of the initial	designated/principal office:
(Street	Address)		
=	Address, if different than street address)		
3. The na	ame and complete street ad	dress of the registered	d agent:
Kent f	Reynolds	639 E. Knoll Drive, Ea	igle, Idaho 83616
(Name)		(Street Address)	
compa	any: <u>Nama</u>	Address SOUTH Manuager of the limited liability Address SOUTH Manuager of the limited liability	
Kent f	Reynolds	639 E. Knoll Drive, Eagle, Idaho 83616	
	g address for future corresponding Drive, Eagle, Idaho 83616	ondence (annual repo	ort natices):
6. Future	e effective date of filing (opti-	onal):	
_	of a manager, member	or authorized	
person.	11-10	0-1	Secretary of State use only
Signature _. Typed Nai	me: Kent Reynolds, Manager	los	
-) F = - · · · · ·			W95481
Signature		:	(X)
O.B. 101010			W42 10
Typed Na			W42 10

IDAHO SECRETARY OF STATE

OS/10/2010 05:00

CK: 2184 CT: 248376 BH: 1234182

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