



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 APR 18 AM 8:50

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Rogue Wave Interactive Solutions, LLC

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

147 N. Cedar, Genesee, Idaho 83832

(Street Address)

P. O. Box 294, Genesee, Idaho 83832

(Mailing Address, if different than street address)

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

Steven Cox

(Name)

147 N. Cedar, Genesee, Idaho 83832

(Street Address)

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

**Name**

**Address**

Steven Cox

P. O. Box 338, 147 N. Cedar, Genesee, Idaho 83832

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

P. O. Box 294, Genesee, Idaho 83832

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Steven Cox

Typed Name: Steven Cox

Signature \_\_\_\_\_

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

Secretary of State use only

IDAHO SECRETARY OF STATE  
04/18/2011 05:00  
CK: 8745 CT: 9666 BH: 1269744  
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