

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY



(Instructions on back of application)

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1. The name of the limited liability company is	s: STEP I STOP I
R.A. Jones LLC	
2. The complete street and mailing addresses	of the initial designated office:
6150 E Bertsch Ave. 1 (Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street address of the	ne registered agent:
Ren Jones 6150	8 E Bertsch Aue Address) NOI Idano 83801
(Name) (Sueer A	hel Idama 83801
4. The name and address of at least one mem company:	
<u>Name</u>	<u>Address</u>
Ren Jones 615	OE Bertson Ave
Amy sones Atr	101 Hano 83801
5. Mailing address for future correspondence ((annual report notices):
6150 & Bertson Ave	Athol Idano 58801
6. Future effective date of filing (optional):	
5. I didie effective date of filling (optional).	
Signature of a manager, member or authori	ized
erson.	
Simple Non Tana	Secretary of State use only
Signature Hynny Jone S Typed Name: Hynny Dony S	IDANO SECRETARY OF STATE
Sher Hallie: Likit A Karan	- 08/21/2014 05:00
Signature Signature	CK:2204 CT:300328 BH:143825 1@ 100.00 = 100.00 ORGAN LLC
yped Name: Ten Jones	- 111261
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