

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 SEP -3 AM 11:01

SHORE PARY OF STATE

1.	The name of the limited liability con	npany is:	STATE OF IDAHO
	MnO,LLC		
2.	The complete street and mailing addresses of the initial designated/principal office:		
	212 E. Main Street #120, Middleton, ld 83644		
	(Street Address)		
	(Mailing Address, If different than street address)		· · · · · · · · · · · · · · · · · · ·
3.	The name and complete street address of the registered agent:		
	Mark Olson	212 E. Main Street #120, Middleton, Id 83644	
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:  Name  Address		
	Mark Olson	212 E. Main Stroot #1	
	Wark Olson	212 E. Main Street #120, Middleton, Id 83644	
	Owen Tennyson	628 Togstad Ct, Nampa, ld 83651	
5	5. Mailing address for future correspondence (annual report notices):		
J.	•		
	212 E. Main Street #120, Middleton, ld 83644		
6. Future effective date of filing (optional):			
Signature of a manager, member or authorized person.			
Signature Mark O D Secretary of State use only			
Typed Name: Mark Olson			
,,			IDAHO SECRETARY OF STATE
Sia	nature		09/03/2010 05:00 CK: 1885 CT: 258962 BH: 1237593
Signature CK: 1885 CT: 258962 BH: 1237593  Typed Name: 1 6 188 = 188,98 ORGAN LLC # 6			
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