



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 FEB 19 AM 9:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Enhanced Perspective, LLC

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

2548 Neibaur Road

(Street Address)

American Falls, Idaho 83211

(Mailing Address, if different than street address)

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

Kimi Taylor

(Name)

2548 Neibaur Rd., American Falls, ID 83211

(Street Address)

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

Name

Address

Kimi Taylor

2548 Neibaur Rd., American Falls, ID 83211

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

2548 Neibaur Rd., American Falls, ID 83211

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Kimi Taylor

Typed Name: Kimi Taylor

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/19/2013 05:00
CK: 561 CT: 279566 BH: 1360789
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