



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

09 MAR 12 AM 8:12

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

SIXRSIG LLC

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

5238 S 11TH E, IDAHO FALLS, ID 83404

(Street Address)

(Mailing Address, if different than street address)

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

ROBERT COLLETTE

(Name)

5238 S 11TH E, IDAHO FALLS, ID 83404

(Street Address)

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

Name

Address

LIAHONA INC

5238 S 11TH E, IDAHO FALLS, ID 83404

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

5238 S 11TH E, IDAHO FALLS, ID 83404

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members)

Signature

Typed Name: ROBERT COLLETTE

Signature

Typed Name: _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
03/12/2009 05:00
CK: 31934 CT: 96514 BN: 1160051
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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