

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 JAN -7 PM 2: 18

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

True Story Media LLC

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

1914 N 14 th Boise, Id 83702

(Street Address)

P.O. Box 116 Boise, Idaho 83701

(Mailing Address, if different than street address)

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

Karen L Zak

(Name)

1914 N 14th Boise, Id 84702

(Street Address)

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

NameAddress

Karen L Zak

1914 N 14th Boise, Id 83702

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

P.O. Box 116 Boise, Id 83701

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Karen L Zak

Signature

Typed Name:

Secretary of State use only

W132911

 IDAHO SECRETARY OF STATE
 01/07/2014 05:00
 CK: NO CK # CT: 291441 BH: 1404053
 1 @ 100.00 = 100.00 ORGAN LLC # 2