



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 AUG 22 AM 11:04

FILED EFFECTIVE

1. The name of the limited liability company is:

Keller Insurance Agency LLC

SECRETARY OF STATE
STATE OF IDAHO

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

2947 East Magic View Drive Meridian, ID 83642

(Street Address)

(Mailing Address, if different than street address)

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

David Keller

(Name)

218 E Rose Lake Drive Middleton, ID 83644

(Street Address)

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

Name

Address

David Keller

218 E Rose Lake Drive Middleton, ID 83644

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

218 E Rose Lake Drive Middleton, ID 83644

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 David Keller

Typed Name: David Keller

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/22/2008 05:00
CK: 145137 CT: 172099 BH: 1132787
1 @ 100.00 = 100.00 ORGAN LLC # 2

g:\com\form\LLC form\cert_org_11c.PMD
Revised 07/2008

6077113