



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 JAN 24 AM 9:04

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

OCEAN WAKE, LLC

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

1149 S DALE ST #302 BOISE, ID 83706

(Street Address)

(Mailing Address, if different than street address)

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

AARON DOUGLAS JONES

(Name)

1149 S DALE ST. #302 BOISE, ID 83706

(Street Address)

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

Name

Address

AARON DOUGLAS JONES

1149 S DALE ST. #302 BOISE, ID 83706

83202

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

1149 S DALE ST. #302 BOISE, ID 83706

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Aaron Jones

Typed Name: AARON DOUGLAS JONES

Secretary of State use only

W133583

Signature _____

Typed Name: _____

IDAHO SECRETARY OF STATE
01/24/2014 05:00
CK: 1009 CT: 292138 BH: 1407450
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