

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

In		12	AM IO:	17
1 6 1	1 2 3 3		,,,,	

E ↔	(Instructions on back	(of application)	
1.	The name of the limited liability cor	mpany is:	STATE OF IDAHO
	Tee	eter Photography LLC	
2.	The complete street and mailing ad 3891 N Tipton Way Meridian ID 83646 (Street Address)	dresses of the initia	l designated/principal office:
	(Mailing Address, if different than street address)		
3.	The name and complete street add	ress of the registere	d agent:
	Sarah Teeter	3891 N Tipton Way N	/leridian ID 83646
	(Name)	(Street Address)	
4.	The name and address of at least of company: Name Sarah E Teeter	one member or man	<u>Address</u>
5.	Mailing address for future correspo 3891 N Tipton Way Meridian ID 83646	ndence (annual rep	ort notices):
6.	Future effective date of filing (optio	nal):	
_	nature of a manager, member o	r authorized	
•	rson. Inature that		Secretary of State use only
	ped Name: Sarah Teeter		engija prozumanij ak Apros
3.1			train secretary of state

11/12/2010 05:00 CK: 547678 CT: 172099 BH: 1246841 1 0 100.00 = 100.00 ORGAN LLC # 2

W97904

Signature_____

Typed Name: