

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIV

(Instructions on back of application)

10 MAR 10 AM 8: 35

 The name of the limited liability compar 	omputer Services LLC SECRETARY OF STATE STATE OF IDAHO
Bull's Eye Computer Services LLC STATE OF IDAHO"	
2. The complete street and mailing addres	sses of the initial designated/principal office:
370 E Jensen	Dr. Hayden, ID. 83835
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street address	of the registered agent:
Tricla A Artis	370 E Jensen Dr. Hayden, ID. 83835
(Name) (S	Breet Address)
The name and address of at least one recompany:	
Name	Address
Tricia A Artis	370 E Jensen Dr. Hayden, ID. 83835
Robert W Artis	370 E Jensen Dr. Hayden, ID. 83835
5.30 W V 15.50	
-	
5. Mailing address for future corresponden	nce (annual report notices):
370 E Jensen	Dr. Hayden, ID. 83835
6. Future effective date of filing (optional):	
ignature of organizer(s). (An organizer is a mer	mber, or is
cting in behalf of a member or members).	Secretary of State use only
signature / in A Am	
yped Name: Tricia A Artis	
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Signature Statut	95 19040 SECRETARY OF STATE 95 95 95 95 95 95 95 95 95 95 95 95 95
yped Name: Robert W Artis	TABLES OF STATE INCHES SECRETARY OF STATE
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