Typed Name: \_\_\_\_\_

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY 2013 MAY -6 AM 9: 29

FILED EFFECTIVE

(Instructions on back of application)

OF ODE THE STATE
1. The name of the limited liability company is:  SECRETAND OF DIAIL  STATE OF IDAHO  Engle Portal Productions LLC.
Engle Portal Productions LLC.
2. The complete street and mailing addresses of the initial designated office:
340 S. 11th Avenue Pocatello, Idaho 83201 (Street Address)
(Making Address, if different than street address)
3. The name and complete street address of the registered agent
o. The halle and complete succedadaless of the registered agent.
Michael Engle 340 S. 11th Ave Pocatello, Idaho 83201 (Street Address)
The name and address of at least one member or manager of the limited liability company:
Name Address
Michael Engle 3405, 11th Ave. Pocatello, Idaho 83201
<u>208 284 3825</u>
5. Mailing address for future correspondence (annual report notices):
340 S. 11th Ave Pocatello, Idaho 83201
O The same of the state of filling (ambigue IV)
6. Future effective date of filing (optional):
Signature of a manager, member or authorized person.
Secretary of State use only
Signature Manager 1 6
Typed Name: Michael Engle
Signature IDAHO SECRETARY OF STATE

05/06/2013 05:00 CK: 1030 CT: 198426 BH: 1372565 1 9 100.00 = 100.00 ORGAN LLC # 2