



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 SEP -2 PM 1:07

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

NLT LLC

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

6147 South Settlement Way Boise, ID 83716

(Street Address)

(Mailing Address, if different than street address)

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

Paul Elmer Nagy

(Name)

6147 S. Settlement Way Boise, ID 83716

(Street Address)

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

Name

Address

Paul E Nagy

6147 S. Settlement Way Boise, ID 83716

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

6147 S. Settlement Way Boise, ID 83716

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Paul E Nagy

Typed Name: Paul E. Nagy

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
09/02/2010 05:00
CK: 506501 CT: 172099 BH: 1237400
1 @ 100.00 = 100.00 ORGAN LLC # 2