



10 SEP -7 PM 3:35

1. The name of the limited liability company is:

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

**(Street Address)**

(Mailing Address, if different than street address)

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

**(Name)**

(Street Address)

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

**Name**

### **Address**

Klaus Keller

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

11 Keller P1 Boise T.O 83716

6. Future effective date of filing (optional): \_\_\_\_\_

Typed Name:

**Secretary of State use only**

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09/08/2010 05:00  
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