

CERTIFICATE OF ORGANIZATIONLED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)	
1. The name of the limited liability company is: STATE OF IDAHO	
Maximum Innovations LLC	
2. The complete street and mailing addresses of the initial designated office:	
2287 Toluka Way	
(Street Address) Boise ID 83712	
(Mailing Address, if different than street address)	
The name and complete street address of the registered agent:	
Daniel E. Jivioen Z287 Tolukaquay BosseTD (Street Address)	2
4. The name and address of at least one member or manager of the limited liability company:	
	\mathbf{z}
Daniel Jividen 2287 Toluka way Boise MATT CAUT 9658 W Hearthside Bour	
THE TOTAL STATE ST	1
Mika Babcock 288 E Wythburnst. Kunas	,
Trenton Horrocks 323 19th AVE South Namy A 825,	2
5. Mailing address for future correspondence (annual report notices): 2287 Toluka way Borse, FD 83712	
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized person.	
Secretary of State use only Signature	
Typed Name: Davie, dividen	
Signature	
Typed Name: IDAHO SECRETARY OF STATE	
02/14/2012 05:00 CX: CASH CT: 266973 BH: 1316512 cont.org_Uc Rev. 07/2010 1 2 180,00 = 180,00 DRGAN LLC #)

1 2 100.08 = 100.00 ORGAN LLC # 2

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