

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2014 AUG 21 AM 8: 37

	All 8:37
1. The name of the limited liability company is:	STATEMATOR
Avaits UC	
2. The complete street and mailing addresses of the	· · · · · · · · · · · · · · · · · · ·
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street address of the re	egistered agent:
Ritary Hickman (alzo (Street Address	Englary Circle, Nampa ID 83687
4. The name and address of at least one member company:	or manager of the limited liability
<u>Name</u>	Address
Britary Hickman (a)20 Sydn	ey Circle, Manpa ID 83687
	1
5 Mailing addrage for future correspondence (ann	ual rapart national:
5. Mailing address for future correspondence (ann	•
ColZO Sydney Circle, Nampa ID	83/67
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized person.	
•	Secretary of State use only
Signature Britary Hickman	IDAHO SECRETARY OF STATE 08/21/2014 05:00
Typed Name: Britary tickman	CK:1006 CT:300295 BH:1438156
	16 100.00 = 100.00 ORGAN LLC #2
Signature	W141351
Typed Name:	