



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 AUG -1 AM 8:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Cross Management and Consulting Group, LLC

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

1950 East 1st Street, Idaho Falls, Idaho 83401

(Street Address)

(Mailing Address, if different than street address)

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

Colby Coombs

(Name)

1950 East 1st Street, Idaho Falls, Idaho 83401

(Street Address)

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

Name

Address

Colby Coombs

1950 East 1st Street, Idaho Falls, Idaho 83401

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

1950 East 1st Street, Idaho Falls, Idaho 83401

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature [Signature]

Typed Name: Colby Coombs

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/01/2013 05:00
CK: 9175 CT: 244871 BH: 1384342
1 @ 100.00 = 100.00 ORGAN LLC # 3

W127782