

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

08 SEP 16 AM 8:27

SECRETARY OF STATE STATE OF IDAHO 1. The name of the limited liability company is:

	Noon 2	Lone 1	LC.						VIII)	
2.	The complete street and mailing addresses of the initial designated/principal office:  360 E 9th Street unit # 14									
	(Street Address)  PO BOX 1148 Sun Valley ID, 83353 (Mailing Address, if different than street address)									
<b>3</b> . '	The name and complete street address of the registered agent:  Carmon Alvarado 360 East 9th Street (unit 14)  (Name) Ketchum Id 8334									
	(Name)	Alvarad	<u>do</u>	360 (Street Ac	East Idress)	9th	Street	etchum	14) Id 85341	
	The name and company:	he name and address of at least one member or manager of the limited liability ompany:								
	Name			<u>Address</u>						
	Carmen A	Alvarad	0	360	East	9th	Street	(unit	14) , Fel 8334	
									· · · · · · · · · · · · · · · · · · ·	
5. !	5. Mailing address for future correspondence (annual report notices):  PBOX 1148 Sun Valley, ID 83353									
<b>6</b> . I	5. Future effective date of filing (optional): 98.4.08									
Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).										
Signature					CPMD		Secretary of S	State use only	R	
Typed Name: CARMEN ALVAR				RADO	Post on			SECRETARY OF	STATE P5 = PP	
Signature				ALLC forms		CK: 1002 1 <b>9</b> 100.00	5/2008   CT: 229774 B   = 100.00 0	H: 1136882 RGAN LLC # 2		
T	ad Manasa				123					