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**CERTIFICATE OF ORGANIZATION FILED EFFECTIVE
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

2014 JUN 19 PM 2:16

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Local LLC

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

2319 Coronado St. Idaho Falls, ID 83404

(Street Address)

(Mailing Address, if different than street address)

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

Landon Walker

(Name)

178 W Woodhaven Ln

(Street Address)

Idaho Falls Id 83404

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

NameLandon WalkerAddress178 W Woodhaven LnIdaho Falls Id 83404

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

2319 Coronado St Idaho Falls, ID 83404 Att Landon

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Typed Name: Landon Walker

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

06/19/2014 05:00

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