



**CERTIFICATE OF ORGANIZATION  
LIMITED LIABILITY COMPANY**

2012 OCT 31 AM 8:59

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Best Charity Network, LLC

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

3622 N Stone Creek Way, Boise, ID. 83703

(Street Address)

(Mailing Address, if different than street address)

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

Jedd Jones

(Name)

2503 W Barberry, Lane, Idaho Falls, ID. 83402

(Street Address)

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

**Name**

**Address**

Pete S. Simpson Jr.

3622 N Stone Creek Way, Boise, ID. 83703

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

P.O. Box 6160, Boise, ID 83707

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Pete S. Simpson Jr.

Signature

Typed Name:

Secretary of State use only

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10/31/2012 05:00  
CK: 3652 CT: 185828 BH: 1345886  
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