

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2015 OCT 15 AM 8: 29

	1.1.	
1. The name of the limited liability of	company is:	SECRETARY OF STATE STATE OF IDAHO
Jac	cob Communicatio	
. The complete street and mailing a 5107 Hwy 20/26 Apartment H, Caldwe (Street Address)		e initial designated/principal office:
(Mailing Address, if different than street address	2)	
. The name and complete street ac		gistered agent:
Shannel Y. Ferguson (Name)	5107 Hwy 20 (Street Address	/26 Apartment H, Caldwell, ID 83605
. The name and address of at leas company:	t one member o	or manager of the limited liability
<u>Namę</u>		<u>Address</u>
Shannel Y. Ferguson	5107 Hwy 20	0/26 Apartment H, Caldwell, ID 83605
5. Mailing address for future corresp		al report notices):
5107 Hwy 20/26 Apartment H, Caldwe	BII, ID 83605	
Future effective date of filing (opt	ional):	
ignature of a manager, member erson.	or authorized	Operation of Objects of the second
Signature Warm Hann		Secretary of State use only IDAHO SECRETARY OF STATE 10/15/2015 05:00
yped Name: Shannel V. Ferguson		CK:206381348778 CT:315667 BH 10 100.00 = 100.00 ORGAN I 10 20.00 = 20.00 EXPEDITE
Signature		
Typed Name:		MIKT 201-

W157296