



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

2012 SEP 26 AM 9:07

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Mr. Ed's Pawn LLC

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

133 Elm Street Blackfoot, Id 83221
(Street Address)

(Mailing Address, if different than street address)

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

Lori Neihart
(Name)

133 Elm St. Blackfoot, Id 83221
(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Lori Neihart</u>	<u>873 Box 245 Blackfoot, Id 83221</u>

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

133 Elm Street Blackfoot, Id 83221

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

Signature of a manager, member or authorized person.

Signature Lori Lynn Neihart
Typed Name: Lori Lynn Neihart

Secretary of State use only

Signature _____
Typed Name: _____

IDAHO SECRETARY OF STATE
09/26/2012 05:00
CK: 1633 CT: 274676 BH: 1341385
1 @ 100.00 = 100.00 ORGAN LLC # 2

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