

CERTIFICATE OF ORGANIZATION

7012 MAR -9 AM 11: 07

LIMITED LIABILITY COMPANY SECRETARY UP STATE STATE OF IDAHO (Instructions on back of application) The name of the limited liability company is: Consulting LLC. 2. The complete street and mailing addresses of the initial designated office: Hague Crt. Courd Alone ID83815 Samo (Mailing Address, if different than street address) The name and complete street address of the registered agent: (Street Address) Courd Alene ID 83815 4. The name and address of at least one member or manager of the limited liability company: 5. Mailing address for future correspondence (annual report notices): same / Sala Hague Ct, Courd Alere, ID 83815 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Secretary of State use only Typed Name: OREGINA M &

cert org. Ic Rev. 07/2010

IDAHO SECRETARY OF STATE 03/09/2012 05:00 (1927895 CT: 172899 BH: 1314345 e 100.00 = 100.00 ORGAN LLC # 2 e 20.00 = 20.00 EXPEDITE C # 3

Typed Name: ____

Signature____