FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

SECRETA	Alf 9: 2	•
SECRETARY STATE OF	OF JATE	C

	·
. The name of the limited liability con	mpany is:
Distinct	ive Consulting Group LLC
2. The complete street and mailing ad	dresses of the initial designated/principal office:
5025 E. Frazier Drive, Post Falls, Iowa 8	3854
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street add	ress of the registered agent:
Northwest Registered Agent LLC	1900 Northwest Blvd., Sie. 196A, Coeur D'Aleno, Idaho 83814 (County of Kookana)
(Name)	(Street Address)
. The name and address of at least o company:	ne member or manager of the limited liability
<u>Name</u>	Address
Karmell Lyn Clark	5025 E. Frazier Drive, Post Falls, Iowa 83854
Mailing addrage for figure accessors	
 Mailing address for future correspondence 5025 E. Frazier Drive, Post Falls, Iowa 83 	•
5023 C. Traziei Drive, Post Paris, Iowa da	0004
5. Future effective date of filing (option	nal):
(4)	
ignature of a manager, member or	authorized
erson.	
AAA	Secretary of State use only
ignature/V	
yped Name: Cheyenne Moseley, Assistant Secretary, LegalZoom.com, Ir	nc:
ignature	
yped Name:	

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IDAHO SECRETARY OF STATE

#3/26/2014 #5=90

CK: 1761586 CT: 172099 BH: 1417137
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1 0 20.00 = 20.00 EXPEDITE C # 3