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CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2008 DEC 30 PM 2:35

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

FILED EFFECTIVE

1. The name of the limited liability company is:

DROP DEAD PRODUCTIONS LLC

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

102E. 100S. BURLEY, ID 83318

(Street Address)

(Mailing Address, if different than street address)

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

DAN SIMPSON

(Name)

102E 100S. Burley, ID 83318

(Street Address)

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

DAN SIMPSON

Name

102E 100S. Burley, ID 83318

Address

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

102E. 100S. Burley, ID 83318

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member of members).

Signature

Typed Name: DAN SIMPSON

Signature _____

Typed Name: _____

Secretary of State use only

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Revised: 07/2008

IDAHO SECRETARY OF STATE
12/30/2008 05:00
CK: 183967 CT: 172899 DN: 1150141
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W80254