



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 SEP 30 AM 10: 49

SECRETARY OF STATE

1. The name of the limited liability company is:		STATE OF IDAHO
	BallsCzar LLC	
2. The complete street and mailing ac 3527 N. 2200 E., Filer, Idaho 83328	ddresses of the initial designated/princ	cipal office:
(Street Address)		
(Mailing Address, if different than street address)		
3. The name and complete street add	Iress of the registered agent:	
United States Corporation Agents, Inc.	943 West Overland Road, Meridian, ID 8	3642
(Name)	(Street Address)	
The name and address of at least of company:	one member or manager of the limited	d liability
<u>Name</u>	Address	
Sean M. Hodge	3527 N. 2200 E., Filer, Idaho 83328	
Debra L. Hodge	3527 N. 2200 E., Filer, Idaho 83328	
<u> </u>		
5. Mailing address for future correspo	ndence (annual report notices):	
c/o: 3527 N. 2200 E., Filer, Idaho 83328		
C. Future offentive data of films (auti-	D -	
6. Future effective date of filing (option	nai):	
O'-mature of a O	1	
Signature of a manager, member or person.	rauthorized	
persein / /	Secretary of State	e use only
Signature		
Typed Name: Karla Figueroa, Legalzoom.c	om, Inc.	
		agrany AF STATE
Signature	09/30/2	
Typed Name:	CK: 486246 CT: 1 @ 100.00 = 1	167623 BH: 1241195 00.00 ORGAN LLC # 2

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