



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

10 APR -7 AM 8:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

No Mind LLC

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

2259 N. Stonecrest Place, Eagle ID 83616

(Street Address)

(Mailing Address, if different than street address)

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

Scott Jorgensen

(Name)

2259 N. Stonecrest Place, Eagle ID 83616

(Street Address)

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

Name

Address

Scott Jorgensen

2259 N. Stonecrest Place, Eagle ID 83616

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

2259 N. Stonecrest Place, Eagle ID 83616

6. Future effective date of filing (optional):

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

Signature

Typed Name: Scott Jorgensen, Member-Manager

Signature

Typed Name:

Secretary of State use only

W 9 2246

IDAHO SECRETARY OF STATE
04/07/2010 05:00
CK: 1186 CT: 246085 BN: 1216544
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