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FILED EFFECTIVE

CERTIFICATE OF O	RGANIZATION Y COMPANY 10 DEC 23 PM 1:07		
(Instructions on back	of application)		
1. The name of the limited liability com	pany is: SECRE BY OF STATE		
Nor	Tech Systems, LLC		
2. The complete street and mailing add 520 Auburn Ave., Idaho Falls, ID 83401 (Street Address)	resses of the initial designated/principal office:		
(Mailing Address, if different than street address)			
3. The name and complete street addre	ess of the registered agent:		
Michael Sherman Norris	520 Auburn Ave., Idaho Falls, ID 83401		
(Name)	(Street Address)		
 The name and address of at least on company: <u>Name</u> <u>Michael Sherman Norris</u> 	e member or manager of the limited liability <u>Address</u> 520 Aubum Ave., Idaho Falls, ID 83401		
5. Mailing address for future correspond c/o: 520 Auburn Ave., Idaho Falls, ID 8340	, , , , , , , , , , , , , , , , , , ,		
6. Future effective date of filing (optiona	N):		
Signature of a manager, member or a person.			
Simultan $\gamma = 1$	Secretary of State use only		
Signature Typed Name: Karla Figueroa, Legalzoom.com, Inc.			
Signature	IDAHO SECRETARY OF STATE 12/23/2010 05:00		
68	n_org_lic Rev. 07/2010 W99081		