



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

10 OCT 12 AM 8:37

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Vector, LLC

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

141 Citation Way Suite 7, Hailey, ID 83333

(Street Address)

(Mailing Address, if different than street address)

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

Steven Giacobbi, Inc.

(Name)

141 Citation Way Suite 7, Hailey, ID 83333

(Street Address)

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

Name

Address

Steven Giacobbi, Inc.

141 Citation Way Suite 7, Hailey, ID 83333

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

141 Citation Way Suite 7 Hailey ID 83333

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name:

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
10/12/2010 05:00
CK: 2757 CT: 237669 BH: 1242474
1 @ 100.00 = 100.00 ORGAN LLC # 2

W97101