



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2013 AUG -6 PM 3:00

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

True Story Project, LLC

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

221 Village Ln, Boise, ID 83702

(Street Address)

(Mailing Address, if different than street address)

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

Matthew K. Taylor

(Name)

802 W. Bannock St. LP 108 Boise, ID 83702

(Street Address)

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

NameAddress

Eric Leins

221 Village Ln. Boise, ID 83702

Chris Anderson

221 Village Ln. Boise, ID 83702

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

221 Village Ln. Boise, ID 83702

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Matthew K. Taylor

Secretary of State use only

Signature

Typed Name:

IDAHO SECRETARY OF STATE
08/06/2013 05:00
CK: 1050 CT: 277095 BH: 1305095
1 @ 100.00 = 100.00 ORGAN LLC # 2

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