

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 2008 JUL -7 PM 1: 45

W 2 1	(Instructions on back of a	application)	SECRETARY OF STATE
1. T	The name of the limited liability compar	ny is:	STATE OF IDAHO
		nagement Group LLC	
2. T	he complete street address, and mailir principal office:	ng address if differ	ent, of the initial designated/
		Suite 200, Eagle, ID, 8	
3. T	The name of the commercial registered agent; or the name and complete street address of the non-commercial registered agent:		
-	Jenni Anderson, 947 Winding	g Creek Suite 200, Ea	gle, ID, 83616
4. T	 The name and address of at least one member or manager of the limited lia company: 		
	<u>Name</u>	Address	
	Jenni Anderson	947 Winding Creek Suite 200, Eagle, ID, 83616	
	Steve Anderson	3664 W Sella Ct, Eagle, ID 83616	
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-			
5. M	alling address for future correspondence	e (annual report n	otices):
	947 Winding Creek S	uke 200, Eagle, ID, 8:	3616
6. Fu	iture effective date of filing (optional):	•	
Signat	ture of an organizer(s). (An organizer is a n	nember,	•
or mem	ting in behalf of a required, and existing, initial in bers).	member	Secretary of State use only
Signati	KWalsh_		40 -
	Name: Kerry Walsh	and the	W15817
.)		furnational	IDAHO SECRETARY OF STA
Signatu	ure	msel.LC form	07/07/2008 05 CK: NONE CT: 145271 BH: 1
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