

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

II MAY 24 RP SETFECTIVE

(Instructions on back of application)

1.	The name of the limited liability com	pany is: hart Group, L	SECREMARY OF STATE STATE OF IDAHO L.C.	
2.	The complete street and mailing addresses of the initial designated/principal office: 9323 N. Government Way #262, Hayden, ID, 83835  (Street Address)			
	(Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	Karla J. Geerhart	9323 N. Government Way #262, Hayden, ID, 83835		
	(Name)	(Street Address	5)	
4.	The name and address of at least one member or manager of the limited liability company:			
	<u>Name</u>	<u>Address</u>		
	Karla J. Geerhart	9323 N. Gov	ernment Way #262, Hayden, ID, 83835	
			· · · · · · · · · · · · · · · · · · ·	
5.	Mailing address for future correspond	dence (annı	al report notices):	
	9323 N. Government Way #262, Hayden,	ID, 83835		
6. Future effective date of filing (optional):				
_	nature of a manager, member or	authorized		
-	son. nature Karla J. Surl	rach	Secretary of State use only	
_	ped Name: Karla J. Geerhart			
' YF	you rading.		IDAHO SECRETARY OF STATE	
Sig	nature		05/20/2011 05:00 CK: 2018 CT: 203497 BH: 1274616	
	ped Name:		1 @ 100.08 = 100.00 ORGAN LLC # 2	

cert\_org\_lic Rev. 07/2010

W183509