

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

	LIMITED LIABILI	k of application) 2012 AUG 16 AM 8: 50
	(Instructions on back	1.1.
1.	The name of the limited liability co	ompany is: SECRETARY OF STATE STATE OF IDAHO
	Me	elrose Resources LLC
2.	The complete street and mailing addresses of the initial designated office: 3129 Homestead Lane Idaho Falls, Idaho 83404	
	(Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	Paul Keele	3129 Homestead Lane idaho Falls, Idaho 83404
	(Name)	(Street Address)
	The name and address of at least one member or manager of the limited liability company:	
	<u>Name</u>	Address
	Paul Keele	3129 Homestead Lane Idaho Falls, Idaho 83404
5.	Mailing address for future correspondence (annual report notices):	
	3129 Homestead Lane Idaho Falls, Idaho 83404	
6.	Future effective date of filing (option	onal):
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Тур	ed Name: Paul Keele	
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