

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 APR -9 AM 8:51

SECRETARY OF STATE

. The name of the limited liability co	ompany is:	STATE OF IDAHO
•	ul Moroz Consulting LLC	
. The complete street and mailing a	ddresses of the initial de	• •
(Street Address)	ilpsoit Nu, Nez Ferce, ID 000	TO
(Mailing Address, if different than street address)		
3. The name and complete street ad		nent:
. The hame and complete street au	uress of the registered by	york.
Paul Moroz		Rd, Nez Perce, ID 83543
(Name)	(Street Address)	
. The name and address of at least company:	one member or manage	r of the limited liability
<u>Name</u>		Address
Paul Moroz	2090 Thompson F	Rd, Nez Perce, ID 83543
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 Mailing address for future correspondence 	ondence (annual report n mpson Rd, Nez Perce, ID 835	
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5. Future effective date of filing (option	onal):	
ignature of organizer(s). (An organizer is cting in behalf of a member or members).	s a member, or is	
sung in beriali of a member of members).	Q	Secretary of State use only
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yped Name: Paul Moroz	() \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
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ignature	Normal LC forms/cerl_org_lc.PMD	IANO SECRETARY OF STATE 04/09/2009 05:0 CK: 1562 CT: 222162 24: 1562

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