

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on back o	of application)
1.	The name of the limited liability comp	pany is: SECTION OF STATE SECTION OF STATE SECTION OF STATE STATE STATE THE River Audio, LLC
2.	The complete street and mailing address 1309 S. Main - Box 158, Riggins Idaho 8354 (Street Address)	resses of the initial designated/principal office:
	(Mailing Address, if different than street address)	
3.	The name and complete street address	ss of the registered agent:
	Jonathan A Wilson	1309 S. Main - Box 158, Riggins Idaho 83549
	(Name)	(Street Address)
The name and address of at least one member or manager of the limited liability company:		e member or manager of the limited liability
	<u>Name</u>	Address
	Jonathan A Wilson	1309 S. Main - Box 158, Riggins Idaho 83549
5.	Mailing address for future correspond	dence (annual report notices):
	1309 5. MAIN - BOX 158, F	
6.	Future effective date of filing (optiona	al):
	nature of a manager, member or a son.	authorized
•	nature	Secretary of State use only
	ped Name: Jonathan A Wilson	
•		IDAHO SECRETARY OF STATE
Sig	nature	12/05/2010 05-00
	ed Name:	1 2 120 00 - 100 00 nocal il c a c

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