## State of Idaho

Office of the Secretary of State

#### **CERTIFICATE OF AUTHORITY**

OF

LFI, LLC

#### File Number W 125621

I, BEN YSURSA, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Uniform Limited Liability Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: 24 May 2013



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By \_\_\_\_\_ plus ains

# APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED LIABILITY COMPANY HAY 24 AMII: 51

	(Instructions on back of ap	plication)	
1.	The name of the limited liability company is	SECRETARY OF STATE  S: STATE OF IDAHO	
	· · · · · · · · · · · · · · · · · · ·	LFI, LLC	
2.	<ol> <li>If the name of the limited liability company is not permissible or is not available in Idaho, the name the foreign limited liability company will use in Idaho is:</li> </ol>		
3.	The jurisdiction under whose laws the limit	ted liability company is formed is:Wyoming	
4.	The name and complete street address of the registered agent in Idaho is:		
	Northwest Registered Agent LLC	105 S. 6th, STE A, Coeur d'Alene, ID 83814	
5.	he street and mailing address of the limited liability company's principal office is:		
	412 N. Main St, Ste 100, Buffalo, WY 82834 Street Address		
6.	he street and mailing address of the limited liability company's office in the jurisdiction nder whose laws it is organized is:		
	412 N. Main St, Ste 100, Buffalo, WY 82834 Street Address		
	Mailing Address, if different	<del></del>	
7.	The name and mailing address of at least one member or manager:		
	Thomas Luckey 412	N. Main St, Ste 100, Buffalo, WY 82834	
8.	The mailing address for future correspond	he mailing address for future correspondence:	
	4655 30th Street, San Diego, CA 92116		

9. Signature of a manager, member or authorized person.

Secretary of State use only

Signature

Dan Keen

Typed Name

IDAHO SECRETARY OF STATE

95/24/2013 95:00

CK: NONE CT: 238717 BH: 1375273

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### STATE OF WYOMING Office of the Secretary of State

I, MAX MAXFIELD, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

LFI, LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **May 14, 2013**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2013-000643329**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 24th day of May, 2013 at 10:28 AM. This certificate is assigned 013831421.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.