251		
CERTIFICATE OF O		/Y
(Instructions on back of application)		11 MAR 14 AM 9: 12
1. The name of the limited liability company is:		SECRE TRY OF STATE STATE OF IDAHO
Le	ad the Way, LLC	STATE OF IDATIO
2. The complete street and mailing add 4931 N. 25th E., Idaho Falls, ID 83401 (Street Address)	resses of the initia	al designated/principal office:
(Mailing Address, if different than street address)		
	es of the register	ed agent:
3. The name and complete street addre		eu agent.
Christopher R. Ellis		
(Name)	(Street Address)	
 The name and address of at least on company: <u>Name</u> 	e member or mar	nager of the limited liability
Christopher R. Ellis	4931 N. 25th E., Ida	aho Falis, iD 83401
	<u> </u>	
	<u> </u>	
5. Mailing address for future correspond	dence (annual rer	nort notices).
4931 N. 25th E., Idaho Falls, ID 83401		
6. Future effective date of filing (optiona	al):	
Signature of a manager, member or	authorized	
person.		Secretary of State use only
Signature Christyle REDOS	<u> </u>	
Typed Name: Christopher R. Ellis		
		IDAHO SECRETARY OF STATE 03/14/2011 05:00
Signature	ſ	CK: 1488 CT: 140737 BH: 1264208 1 @ 100.00 = 100.00 Organ LLC # 2
Typed Name:	·······	W 101431
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