

## CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

2014 APR -2 AM 9: 19

(Instructions on back of application)

	(modadiono on baok	o. application)	OF OPEN PAR OVER A TOP	
1.	The name of the limited liability com	npany is:	SEGRETARY OF STATE	
	Michelle Darcy Event Planning Services LLC		STATE OF IDAHO	
2.	2. The complete street and mailing addresses of the initial designated office: 686 W. Aikens Ct.			
	(Street Address) Eagle, ID 83616			
3.	(Mailing Address, if different than street address)  3. The name and complete street address of the registered agent:			
J.	5. The hame and complete substitutions of the registered agent.			
	Michelle Darcy		Ct., Eagle ID 83616	
	(Name)	(Street Address)		
4. The name and address of at least one member or manager of the limited liability company:			manager of the limited liability	
	<u>Name</u>	000144 47	Address	
	Michelle Darcy 686 W. Aikens Ct., Eagle ID 83616		Ct., Eagle ID 83616	
5.	. Mailing address for future correspondence (annual report notices): 686 W. Aikens Ct., Eagle ID 83616			
6.	6. Future effective date of filing (optional):			
	nature of a manager, member or son.	authorized		
por			Secretary of State use only	
Sigi	nature (Muchelle Porc	7		
Тур	ed Name: Michelle Darcy			
Sia	nature		IDAHO SECRETARY OF STATE	
Typed Name: TORNU SECRETARY 05: 104/02/2014 05: Typed Name: 108.00 = 100.00 DRGAN LL				

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