

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

10 JAN 21 PM 1:13

SECRETARY OF STATE STATE OF IDAHO

|   | 208Advertise LLC  |
|---|---|
| -   | dresses of the initial designated/principal office:   |
|   | Sophie, Eagle, Idaho 83616  |
| (Street Address)                                    |   |
| (Mailing Address, if different than street address) |   |
| 3. The name and complete street add                 | ress of the registered agent:   |
| Jeremy DeLoach                                      | 281 S. Sophie, Eagle, Idaho 83616   |
| (Name)  | (Street Address)  |
| The name and address of at least o company:         | one member or manager of the limited liability  |
| <u>Name</u>   | Address   |
| Josh DeLoach  | 4708 N. Zachary Way, Meridian, Idaho 83646  |
| Jeremy DeLoach                                      | 281 S. Sophie, Eagle, Idaho 83616   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
| 5. Mailing address for future correspond            | ndence (annual report notices):   |
| 281 S. S  | Sophie, Eagle, Idaho 83616  |
|   |   |
| 6. Future effective date of filing (option          | nal):   |
|   |   |
| Signature of organizer(s). (An organizer is a       | a member, or is   |
| acting in behalf of a member or members).           | Secretary of State use only   |
| Signature ZCZ                                       | Q.  |
|   |   |
| Typed Name:   | IDAHO SECRETARY OF STATE  |
| Sign at up  | CK: 374669 CT: 172899 BH: 1284476   |
| Signature   | IDAHO SECRETARY OF STATE  ### DIAMO |
| Typed Name: Josh DeLoach                            |   |
|   |   |