Typed Name: _

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FILED EFFECTIVE

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY (Instructions on back of application) CERTIFICATE OF ORGANIZATION SECRETARY OF STATE OF IDAHO	ATE
1. The name of the limited liability company is:	0-
(Street Address) (Mailing Address, if different than street address) 3. The name and complete street address of the registered agent:	Ť
(National) And Annual (Six Address) And Annual (Six Address) And Annual (Six Address) Annual	307
Granush Hance 2715 Summercered A Milwell, 3	ь
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5. Mailing address for future correspondence (annual report notices): 2715	かつ
6. Future effective date of filing (optional):	
Signature of a manager, member of activitized person. Secretary of State use only Typed Name: ()	
Signature	

IDAHO SECRETARY OF STATE
09/17/2012 05:00
CK: CASH CT: 241620 BH: 1348182
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