

CERTIFICATE OF ORGANIZATION LED EFFECTIVE LIMITED LIABILITY COMPANY

09 MAY 14 AM 8: 28

(Instructions on back of application)

SECRETARY OF STATE

The name of the limited liability company is:		STATE OF IDAHO
Kralice	k Speaking Group, LLC	
The complete street and mailing add	Iresses of the initial de	signated/principal office:
3:	949 N. 19th Street	
(Street Address)	ur d'Alene, ID 83815	
(Mailing Address, if different than street address)	di distino, il oco io	
3. The name and complete street addre	ess of the registered ag	gent:
Carrie Kralicek		Coeur d'Alene, iD 83815
(Name)	(Street Address)	
The name and address of at least or company:	ne member or manage	r of the limited liability
<u>Name</u>	Address	
Carrie Kralicek	3949 N. 19th Street, Coeur d'Alene, ID 83815	
		· .
5. Mailing address for future correspon	dence (annual report r	notices):
3949 N. 19th S	Street, Coeur d'Alene, ID 83	3815
6. Future effective date of filing (option	al):	
signature of organizer(s). (An organizer is a	member, or is	· .
cting in behalf of a member or members).		
A. V.	OWG	Secretary of State use only
ignature <i>Quie Maliale</i> yped Name: Carrie Kralicek	3 34 6	J
yped Name: Carrie Kralicek	cert_o	· · · · · · · · · · · · · · · · · · ·
	MomstLC formsteen_org_itc.PMD	IDANO SECRETARY OF STATE 05/14/2009 05:00
signature	swicc ed 077	CK: 6636 CT: 205450 BV: 1170434 1 0 100.00 = 100.00 ORSAN LLC #
Typed Name:	Mom	1 0 28.00 = 20.00 EXPEDITE C

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