



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**

2013 JAN 22 AM 9:36

(Instructions on back of application)

 SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

 Matthew August Alexander LLC

2. The complete street and mailing addresses of the initial designated office:

5512 W. Pinta Coeur d Alene Idaho 83815

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Matthew August Alexander

(Name)

5512 W. Pinta Coeur d Alene Idaho 83815

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name
Address

Lisa Ann Alexander

5512 W. Pinta Coeur d Alene Idaho 83815

5. Mailing address for future correspondence (annual report notices):

5512 W. Pinta Coeur d Alene Idaho 83815

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

 Signature Matthew A. Alexander

 Typed Name: Matthew August Alexander

 Signature Lisa Alexander

 Typed Name: Lisa Ann Alexander

Secretary of State use only

 IDAHO SECRETARY OF STATE  
01/22/2013 05:00  
CK: 5298 CT: 270453 BH: 1356700  
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