

CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

2014 SEP 24 AM 8: 39

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited lial	hility company is:	STATE OF IDAHO"	
TalkingBusinessCard, LLC,	omy company to		
2. The complete street and ma	ailing addresses of the	e initial designated office:	
(Street Address) Nampa, ID 83687			
(Mailing Address, if different than street	t address)		
. The name and complete str	eet address of the re	gistered agent:	
Jeremy Glassco	6665 East Gr	6665 East Greens Drive, Nampa, ID 83687	
(Name)	(Street Address	(Street Address)	
company: <u>Name</u>		<u>Address</u>	
Jeremy Glassco	6665 East Gr	6665 East Greens Drive, Nampa, ID 83687	
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5. Mailing address for future of	orrespondence (annu	al report notices):	
6665 East Greens Drive, Namp	•		
5. Future effective date of filing	g (optional):		
ignature of a manager, mer	mber or authorized		
erson.			
		Secretary of State use only IDAHO SECRETARY OF STATE	
ignature		09/24/2014 05:00	
yped Name: Veremy Glassco		CK:2721 CT:230782 BH:144258; 16 100.00 = 100.00 ORGAN LLC	
ignature		16 20.00 = 20.00 EXPEDITE C	
yped Name:			
	····	1-10-3	

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