

CERTIFICATE OF ORGANIZATION ED EFFECTIVE LIMITED LIABILITY COMPANY

08 AUG 27 AM 8: 53

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited liability com	pany is: STATE OF IDAHO
	Jus Results, , LLC
2. The complete street and mailing add	resses of the initial designated/principal office:
	6 W Stafford Drive
(Street Address)	agle, Idaho 83616
(Mailing Address, if different than street address)	
3. The name and complete street addre	ess of the registered agent:
Jared Sherburne	876 W Stafford Drive
(Name)	(Street Address)
The name and address of at least on company: Name Jared Sherbume	e member or manager of the limited liability Address 876 W Stafford Drive
Allison Sherburne	
, and on one dance	876 W Stafford Drive
	·
5. Mailing address for future correspond	
876 W Stafford	d Drive - Eagle, Idaho 83616
6. Future effective date of filing (optional	I):
Signature of organizer(s). (An organizer is a matching in behalf of a member or members).	nember, or is
Signature	Secretary of State use only
Typed Name: Jared Sherburne	3
Signature allem Shelle	IDAHO SECRETARY OF STATE 98/27/2008 05:00 CK: 591 CT: 83867 BH: 1133292
Typed Name: Allison Sherburne	1 @ 100.00 = 100.00 ORGAN LLC #

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