

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

11 JUL 11 AM 9: 13

(Instructions on back of application)

	(instructions on a	back of application)	VOF STATE	
1. The na	me of the limited liability	company is:	STATE OF IDAHO	
	NATIO	NWIDE TRADERS GROUP, LLC.		
	The complete street and mailing addresses of the initial designated/principal office: 1463 Commerce Way, Idaho Falls, Idaho 83401			
(Street A	ddress)			
(Mailing	Address, if different than street addre	988)		
. The na	me and complete street	address of the registered ago	ent:	
Kendal	ll Koplin	1463 Commerce Way, Idal	no Falls, Idaho 83401	
(Name)		(Street Address)		
	The name and address of at least one member or manager of the limited liability company:			
	<u>Name</u>		Address 1463 Commerce Way, Idaho Falis, Idaho 83401	
Kenda	ll Koplin	1463 Commerce Way, Ida	no Falls, Idano 83401	
	address for future corre	spondence (annual report no	otices):	
6. Future	effective date of filing (o	ptional):	 	
_	of a manager, membe	r or authorized		
oerson. Signature_ Typed Nan	ne: Jeffeach. Ward		Secretary of State use only	
Signature			TRAMA CEPPETADY OF STATE	

IDAHO SECRETARY OF STATE
07/11/2011 05:00
CK: 7923 CT: 122182 BH: 1281842
1 0 100.00 = 100.00 ORGAN LLC # 2

W104849

Typed Name: _____