



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2013 FEB 26 AM 9:01

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Javelin, LLC

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

439 E. Shore Drive Suite # 100 Eagle ID 83616

(Street Address)

(Mailing Address, if different than street address)

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

Jeffrey Johnson

439 E. Shore Drive Suite # 100 Eagle ID 83616

(Name)

(Street Address)

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

Name

Address

Jeffrey Johnson

439 E. Shore Drive Suite # 100 Eagle, ID 83616

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

439 E. Shore Drive Suite # 100 Eagle, ID 83616

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name:

Jeffrey Johnson

Signature

Typed Name:

Secretary of State use only

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02/26/2013 05:00
CK: 6469 CT: 200243 BH: 1361881
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