

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 FEB 13 AM 11: 41

| <b>€</b>                  | (Instructions of   | n back of application)                    | SECRETARY OF STATE<br>STATE OF IDAHO                                    |  |
|---------------------------|--|---|---|--|
| 1. The na                 | me of the limited liabil   | ity company is:                           | STATE OF TRAFFIC  |  |
| McCall                    | Wedding and Event Direct   | ory, LLC                                  |   |  |
| 2. The cor                | The complete street and mailing addresses of the initial designated office:  |   |   |  |
| (Street A                 |  |   |   |  |
| McCall                    | ID 83638   |   |   |  |
| (Mailing A                | Address, if different than street ad   | dress)                                    |   |  |
| 3. The nar                | me and complete stree  | t address of the registered               | agent:  |  |
| Sherry                    | cheline 107 Scheline Lr  |   | Ln. McCall, ID 83638  |  |
| (Name)                    |  | (Street Address)                          |   |  |
| 4. The name               | у.   | east one member or mana                   | ger of the limited liability  |  |
| Name<br>Kathleen Scheline |  | Address 107 Scheline Ln. McCall, ID 83638 |   |  |
| Sherry Scheline           |  | 107 Scheline Ln. McCall, ID 83638         |   |  |
| _                         |  |   |   |  |
| <del></del>               |  |   |   |  |
|                           |  |   |   |  |
|                           |  |   |   |  |
|                           |  |   |   |  |
| 5. Mailing a              | address for future corre   | espondence (annual report                 | notices):   |  |
| 6. Future e               | ffective date of filing (o   | ptional):                                 |   |  |
| Signature of person.      | f a manager, membe   | er or authorized                          |   |  |
| Signature_                | 3 < 0.00   |   | Secretary of State use only   |  |
|                           | Sherry Scheline  | XVV C                                     |   |  |
| rypeu Maine               | - Construction of the cons |   |   |  |
| Signature                 |  |   | IDAHO SECRETARY OF STATE<br>02/13/2014 05:00                            |  |
| Typed Name:               |  |   | CK: 1782823 CT: 172999 BH: 1418588<br>1 8 188.88 = 188.88 ORGAN LLC # 2 |  |

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