



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2016 APR 20 PM 1:39

1. The name of the limited liability company is: SECRETARY OF STATE
DE ANDERSON MARKETING, LLC
STATE OF IDAHO
2. The complete street and mailing addresses of the initial designated office:
515 WEST MAIN STREET ST. ANTHONY, ID 83445
(Street Address)

(Mailing Address, if different than street address)
3. The name and complete street address of the registered agent:
DALLON ERIC ANDERSON 515 WEST MAIN STREET ST. ANTHONY, ID 83445
(Name) (Street Address)
4. The name and address of at least one member or manager of the limited liability company:

<u>Name</u>	<u>Address</u>
<u>DALLON ERIC ANDERSON</u>	<u>515 WEST MAIN STREET ST. ANTHONY, ID 83445</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
5. Mailing address for future correspondence (annual report notices):
515 WEST MAIN STREET ST. ANTHONY, ID 83445
6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature 

Typed Name: DALLON ERIC ANDERSON

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/20/2016 05:00

CK:129 CT:323434 BH:1524547

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