



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2009 JAN -8 AM 8:40
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Re\$ource \$olutions I LLC

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

414 Shoup Ave Suite 112 Idaho Falls, Idaho 83402

(Street Address)

(Mailing Address, if different than street address)

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

Stan Mills

(Name)

2870 Sandstone Dr. Idaho Falls, Idaho 83404

(Street Address)

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

NameAddress

Resource Solutions, LLC

2870 Sandstone Dr. Idaho Falls, Idaho 83404

Media Venture Productions, LLC

422 White Ave. Suite 323 Grand Junction, CO 81501

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

414 Shoup Ave Suite 112 Idaho Falls, Idaho 83402

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: Stan W. Mills

Signature _____

Typed Name: _____

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Revised 07/2008

Secretary of State use only
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IDAHO SECRETARY OF STATE
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