



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

10 JUL 29 AM 8:48

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

M Star LLC

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

3405 N 3300 E Kimberly, ID 83341

(Street Address)

P.O. Box 25 Kimberly, ID 83341

(Mailing Address, if different than street address)

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

David Makings

3405 N 3300 E, Kimberly, ID 83341

(Name)

(Street Address)

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

Name

Address

~~Dave M~~

David J "Dave" Makings P.O. Box 25
Kimberly, ID 83341

Joy K. "Kathy"
Makings

P.O. Box 25
Kimberly, ID 83341

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

M Star P.O. Box 25, Kimberly, ID 83341

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

Signature of a manager, member or authorized person.

Signature

Dave Makings

Typed Name:

David Makings

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
07/29/2010 05:00
CK: 1001 CT: 250001 BH: 1232640
1 @ 100.00 = 100.00 ORGAN LLC # 2

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