

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

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1.	The name of the limited liability company is: SECRETARY OF STATE STATE OF IDAHO		STATE OF DESTATE
	Dead Center Amusement, LLC		
	(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)		
2.	The complete street and mailing addresses of the principal office is: 2201 Ivan Ave Pocatello, ID 83201		
	(Street Address)		
	(Mailing Address, if different)		
3.	The name of the registered agent and street address of the registered agent:		
	Billy Crosland	2201 Ivan Ave Pocatello, ID 83201	
	(Name)	(Address cannot be a post office box or postal mail box)	
4.	The name and address of at least one governor of the limited liability company:		
	Billy Crosland	2201 Ivan Ave Pocatello, ID 83201	
	(Name)	(Address) 2201 Ivan Ave Pocatello, ID 83201	
	Laci Crosland		
	(Name)	(Address)	
	(Name)		
	(Hante)	(Address)	
	(Name)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	2201 Ivan Ave Pocatello, ID 8320)1	
	(Address)		
Sig	nature of organizer(s).		
Signature:			Secretary of State use only
_	· · · · · · · · · · · · · · · · · · ·		1DAHO SECRETARY OF STATE 06/27/2016 05:00
Prir	nted Name: Billy Crosland		CK:NO CK# CT:326170 BH:1535203 10 100.00 = 100.00 ORGAN LLC #2
Sig	nature: <u>Javit Casland</u>		16 20.00 = 20.00 EXPEDITE C #3

FILED EFFECTIVE

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Rev. 11/2015

Printed Name: Laci Crosland