

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 FEB -3 AM 8:31

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

D. SVAMBERK PHOTOGRAPHY, LLC

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

564 Jackson St.

(Street Address)

Boise, ID 83705

(Mailing Address, if different than street address)

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

Dominique Svamberk

(Name)

564 Jackson St., Boise, ID

(Street Address)

83705

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

Name

Address

DOMINIQUE SVAMBERK564 JACKSON ST BOISE ID 83705

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

564 Jackson St., Boise, ID 83705

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

D. Svamberk

Typed Name:

Dominique Svamberk

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008IDAHO SECRETARY OF STATE
02/03/2010 05:00
CK: 652 CT: 244572 BH: 1206462
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