

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 7015 1110 29 AM 10: 46

| 2 C3 | (Instructions of | on back of application) | |
|--|--|-----------------------------------|---|
| | · | , | SEUMETARY OF STATE STATE OF IDAHO |
| The nam | ne of the limited liab | ility company is: | STATE OF IDAHO |
| Values F | Publications, LLC | | |
| | stol Rd, Moscow, ID 838 | iling addresses of the ini 343 | tial designated office: |
| (Mailing Ad | ddress, if different than street | address) | |
| The nam | ne and complete stre | eet address of the registe | ered agent: |
| Marshall | l Driskill | 1350 Bristol Rd. N | loscow, ID 83843 |
| (Name) | · · · · · · · · · · · · · · · · · · · | (Street Address) | |
| The nam | | least one member or m | anager of the limited liability |
| | <u>Name</u> | | <u>Address</u> |
| Marshall | Driski | 1350 Bristol Rd. M | Moscow, ID 83843 |
| , | | | |
| | | | |
| | address for future co istol Rd. Moscow, ID 838 | orrespondence (annual re | eport notices): |
| 1350 Bri | | 343 | eport notices): |
| 1350 Bri Future e gnature o | istol Rd. Moscow, ID 838 | (optional): | eport notices): |
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| Future egnature ourson. gnature | istol Rd. Moscow, ID 838 iffective date of filing if a manager, mem if a manager, mem if Marshall Driskill | (optional): | Secretary of State use only IDAHO SECRETARY OF STATE |

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