



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

The Collective Experience LLC

2. The complete street address, and mailing address if different, of the initial designated/ principal office:

5314 E. Softwood Drive, Boise, Idaho 83716

3. The name of the commercial registered agent; or the name and complete street address of the non-commercial registered agent:

National Registered Agents, Inc. 1423 Tyrell Lane Boise, ID 83706 County of Ada

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

Name

Address

Christopher Rowilson

5314 E. Softwood Drive, Boise, Idaho 83716

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

c/o:5314 E. Softwood Drive, Boise, Idaho 83716

6. Future effective date of filing (optional):

Signature of an organizer(s). (An organizer is a member, or is acting in behalf of a required, and existing, initial member or members).

Signature Karmelia Fredrick

Typed Name: Karmelia Fredrick, Legalzoom.com, Inc.

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
02/13/2009 05:00
CK: 312640 CT: 167623 BH: 1156944
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

U081415

FILED EFFECTIVE