



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 JAN 21 PM 4:33

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Crossfire Capital LLC

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

605 E River Quarry Ct

(Street Address)

Eagle ID 83616

(Mailing Address, if different than street address)

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

Douglas E Black

(Name)

605 E River Quarry Ct; Eagle, ID 83616

(Street Address)

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

Name

Douglas E Black

Address

605 E River Quarry Ct; Eagle, ID 83616

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

605 E River Quarry Ct; Eagle, ID 83616

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Douglas E Black

Secretary of State use only

Signature _____

Typed Name: _____

IDaho SECRETARY OF STATE
 01/21/2011 05:00
 CK: 3154 CT: 223649 BH: 1256474
 1 P 100.00 = 100.00 ORGAN LLC # 2

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