

CERTIFICATE OF ORGANIZATION

r (instructions	on back of application)	
	STATE OF	mano
The name of the limited lia	bility company is:	•
	Cahn Capital, LLC	
The complete street and ma 1316 E. Washington St. Boise, I	alling addresses of the initial designated offic ID 83712	:e:
(Street Address)		· · · · · · · · · · · · · · · · · · ·
(Mailing Address, if different than street	(Address)	
	•	:
ne name and complete str	eet address of the registered agent:	
David Cahn	4040 E Washing a -	•
	1318 M WOODSANDS CA D-: ID Assess	
(Name)	1316 E. Washington St., Boise, ID 83712 (Street Address)	
he name and address of atompany;	(Street Address) I least one member or manager of the limited	liability
he name and address of at Ompany: Name	(Street Address) I least one member or manager of the limited Address	liability
he name and address of atompany;	(Street Address) I least one member or manager of the limited	liability
he name and address of at Ompany: Name	(Street Address) I least one member or manager of the limited Address	liability
he name and address of at Ompany: Name	(Street Address) I least one member or manager of the limited Address	liability
he name and address of at Ompany: Name	(Street Address) I least one member or manager of the limited Address	liability
he name and address of at Ompany: Name	(Street Address) I least one member or manager of the limited Address	liability
he name and address of at Ompany: Name	(Street Address) I least one member or manager of the limited Address	liability
he name and address of at Ompany: Name	(Street Address) I least one member or manager of the limited Address	liability

1316 E. Washington St., Boise, ID 83712

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: David Cahn

Signature_

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE 95/19/2912 95:99 CX: 41435 CT: 2618 BH: 1323701 1 8 100.00 = 100.00 ORGAN LLC # 2