## FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 JUL 27 AM 8 56

(Instructions on back of application)

	(moduciono on pack	or application)	SECRETARY OF ON
1. The	e name of the limited liability com	pany is:	SECRETARY OF STA STATE OF IDAHO
JC	ORDAN CONSULTING LLC		
2. The	The complete street and mailing addresses of the initial designated/principal office:		
	852 Sage Creek Dr., . Boise, ID 83714 treet Address)		
(M	(Mailing Address, if different than street address)		
3. The	The name and complete street address of the registered agent:		
	Pavid Jordan	3852 Sage Creek Dr., . Bois	e, ID 83714
(14	lame)	(Street Address)	
	e name and address of at least on mpany:	e member or manager	of the limited liability
	<u>Name</u>	<u>Address</u>	
Da	Pavid Jordan	3852 Sage Creek Dr Boise	, ID 83714
_		•	
	, -		
*****			
		•	
5. Ma	ailing address for future correspond	dence (annual report n	otices):
38	852 Sage Creek Dr., . Boise, ID 83714		
6. Fut	ture effective date of filing (options	al):	
Sienotu	uro of associated (a)		
	ure of organizer(s). (An organizer is a r	member, or is	
	Markon	. 9	Secretary of State use only
Signatu			
Typed I	Name: MARSHA SIHA	Plotomatil C formstond ong Icc Parity Revised 0772006	
Dianat:	INO.	7.2008 7.72008	IDAHO SECRETARY OF STATE
	ure Name:	CK:	07/27/2015 05:00 34987 CT:187501 BH:14854
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