



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JAN 19 PH 3:09

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

C.S. Wilson & Associates LLC

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

7303 E Hampshire Ln Nampa, ID 83687

(Street Address)

(Mailing Address, if different than street address)

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

Christophor S. Wilson

7303 E. Hampshire Ln Nampa, ID 83687

(Name)

(Street Address)

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

Name

Address

Christophor S. Wilson

7303 E. Hampshire Ln Nampa, ID 83687

Emily Wilson

7303 E. Hampshire Ln Nampa, ID 83687

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

7303 E. Hampshire Ln Nampa, ID 83687

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: Christophor S. Wilson

Signature

Typed Name:

Secretary of State use only

g:\corpforms\LLC forms\cert_org_llc.PMD
Revised 07/2008

IDAHO SECRETARY OF STATE
01/19/2010 05:00
CK: 1025 CT: 244810 BH: 1204841
1 @ 100.00 = 100.00 ORGAN LLC # 2

W89847