

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application) 2015 JUN -2 PM 3: 12

The name of the limited liabi     SEE MEDIA LLC	lity company is:	SECRETARY OF STATE STATE OF IDAHO	
2. The complete street and mail 1104 11TH AVE SOUTH NAMPA (Street Address)	•	initial designated office:	
(Mailing Address, if different than street a	ddress)		
3. The name and complete stre	et address of the reg	istered agent:	
JUSTIN RICKELMAN	1104 11TH AV	/E SOUTH NAMPA IDAHO 83651	
(Name)	(Street Address)		
The name and address of at company:	least one member or	manager of the limited liability	
<u>Name</u> JUSTIN RICKELMAN	4464 4470 4	Address 1104 11TH AVE SOUTH NAMPA IDAHO 83651	
<ol><li>Mailing address for future cor</li></ol>	rrespondence (annua	al report notices).	
5. Walling address for future collaboration 1104 11TH AVE SOUTH NAMPA	•	ii report nouces).	
6. Future effective date of filing	(optional):		
Signature of a manager, mem person.	ber or authorized		
1 ~	/	Secretary of State use only	
Signature JUSTIN RICKELMAN	1	IDAHO SECRETARY OF STATE 06/02/2015 05:00 CK:1116 CT:310902 BH:147802 16 100:00 = 100:00 ORGAN LLC	

Cent\_org\_lic Rev\_07/2010

Signature\_\_\_\_\_

Typed Name: