

FILED EFFECTIVE



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2008 JUL 17 PM 3:11

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Matthew Fackrell LLC

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

1187 Oak Cove Shelley ID 83274  
(Street Address)

(Mailing Address, if different than street address)

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

Matthew Fackrell 1187 Oak Cove Shelley  
(Name) (Street Address) ID 83274

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

Name	Address
<u>Matthew Fackrell</u>	<u>1187 Oak Cove Shelley ID 83274</u>
<u>Amy Fackrell</u>	

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

same

6. Future effective date of filing (optional)

Today July 18, 2008

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

Signature [Handwritten Signature]  
Typed Name: Matthew Fackrell

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE  
07/17/2008 05:00  
CK: 133094 CT: 172099 BH: 1127583  
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