

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

West of the second	(Instructions on ba	ck of application)	PILED EFFECTIVE
1.	ne name of the limited liability company is:		2013 SEP -3 AM 9: 35
	Directed Light, LLC		SECRETAL TO FISTATE
2.	The complete street and mailing a	ddresses of the initia	designated office:
	1148 County Cork Lane Idaho Falls, ID 83404		
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Sharon Jennece Kahuhu	1148 County Cork La	ne
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		Address
	Sloane Ah-chick Kahuhu	1148 County Cork Lar	ne Idaho Falls, ID 83404
	Sharon Jennece Kahuhu	1148 Counchy Cork La	ne Idaho Falls, ID 83404
	<del></del>		
5.	Mailing address for future correspo	ondence (annual repo	rt notices):
	- Jrime		1
6.	Future effective date of filing (optio	nal):	
Sign	nature of a manager, member o	r authorized	
•	- M ()	711)	Secretary of State use only
Sign	ature Man June 1	allih	
Туре	ed Name: <u>Sharon Jennece</u>	Kahuhu	

IDAHO SECRETARY OF STATE
09/03/2013 05:00
CK: 3013 CT: 207110 BH: 1388570
1 0 100.00 = 100.00 ORGAN LLC # 2

Signature\_\_

Typed Name: Sloane Ah-chick