CERTIFICATE OF LIMITED LIABILI (Instructions on back 1. The name of the limited liability con	TY COMPANY (of application)	2012 MAR -5 PN 2: 43 SECRETARY OF STATE STATE OF IDAHO
First Touch Marketing LLC		
2. The complete street and mailing addresses of the initial designated office: 4205 Holmes Rd, Coeur d Alene, Idaho 83815 (Street Address) (Mailing Address, if different than street address)		
3. The name and complete street address of the registered agent:		
Shawn Van Leuven (Name)	4205 Holmes Rd, Coeur d Alene, Idaho 83815 (Street Address)	
 The name and address of at least one member or manager of the limited liability company: 		
Name	Address	
Shawn Van Leuven	4205 Holmes Rd, Coeur d Alene, Idaho	
5. Mailing address for future correspon 4205 Holmes Rd, Coeur d Alene, Idaho 8	• •):
6. Future effective date of filing (optional):		
person.	•	tary of State use only
Signature Typed Name: Uan he uven		
Signature Typed Name:	CK: 9	IDAHO SECRETARY OF STATE 3/06/2012 05:00 23666 CT: 172099 BH: 1313696 00.00 = 100.00 Organ LLC # 2
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