



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 FEB 24 AM 8:55
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Adams Consulting LLC

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

583 W Indian Rocks St Meridian, Idaho 83646
(Street Address)

(Mailing Address, if different than street address)

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

Walter Adams
(Name)

583 W Indian Rocks St Meridian
(Street Address)

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

Name	Address
<u>Walter Adams</u>	<u>583 W Indian Rocks St Meridian</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

583 W Indian Rocks St Meridian Idaho 83646

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

Signature of a manager, member or authorized person.

Signature Walter Adams
Typed Name: Walter Adams

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/24/2012 05:00
CK: 1210 CT: 267361 BH: 1312070
1 @ 100.00 = 100.00 ORGAN LLC # 2

W111400