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CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2012 NOV 30 PM 3:34
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Compassion Action LLC

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

101 W. Prairie Center #434 Hayden, ID. 83835

(Street Address)

(Mailing Address, if different than street address)

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

Elizabeth T. Kohl

(Name)

101 W. Prairie Center #434 Hayden, ID. 83835

(Street Address)

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

Name**Address**

Elizabeth T. Kohl

101 W. Prairie Center #434 Hayden, ID. 83835

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

101 W. Prairie Center #434 Hayden, ID. 83835

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Elizabeth T. Kohl

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
11/30/2012 05:00
CK: 1211076 CT: 172099 BH: 1349512
1 @ 100.00 = 100.00 ORGAN LLC # 2

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