

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$100.00 typed, \$120 not typed Complete and submit the application in duplicate.

1. The name of the limited liability company is: **Covenant Business Consulting, LLC**

(Remember to include the words "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC. or LC)

The complete street and mailing addresses of the principal office is: 2. 875 N. Tubsgate Place Apt #9 | Post Falls, ID 83854

(Street Address)

(Mailing Address, if different)

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

Robert Michael Marmet	875 N. Tubsgate Place Apt #9 Post Falls, ID 83854
(Name)	(Address)

The name and address of at least one governor of the limited liability company: 4.

Robert Michael Marmet	875 N. Tubsgate Place Apt #9 Post Falls, ID 8385
(Name)	(Address)
(Namé)	
(ranc)	(Address)
(Namē)	(Address)
(Name)	(Address)
Mailing address for future corresponde	ance (annual report potices):
Mailing address for future corresponde 875 N. Tubsgate Place Ap	
-	ence (annual report notices): ot #9 Post Falls, ID 83854
875 N. Tubsgate Place Ap	
875 N. Tubsgate Place Ap (Address)	
875 N. Tubsgate Place Ap	ot #9 Post Falls, ID 83854
Address) (Address) nature of organizer(s). nted Name: Robert Marmet	Secretary of State use only
875 N. Tubsgate Place Ap (Address)	Secretary of State use only IDAHO SECRETARY OF STATE
Address) (Address) nature of organizer(s). nted Name: Robert Marmet	Secretary of State use only IDAHO SECRETARY OF STATE 02/07/2018 05:00

WIGIDAD

Signature:

Rev. 01/2018

SECRETARY OF STATE STATE OF IDAHO

FILED EFFECTIVE

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