

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	LIMITED LIABILITY COI	MPANY 09 SEP 28 AM 9: 30	
v ±0	(Instructions on back of applica	SECRETARY OF STATE	
1. T	he name of the limited liability company is:	STATE OF IDAHO	
,	Panis Publishing UC		
2. T	The complete street and mailing addresses of the initial designated/principal office:		
į	531 N. 6th Street Pay	gette 10 83661	
•	(Street Address) P.O. BOX 42 Pol (Malling Address, if different than street address)	gette (D 8366)	
	he name and complete street address of the	registered agent:	
	Nicole Holten 531	N Golf Street	
•	(Name) (Street Addi	N. 6+6 Street  Payette 10 83661	
	The name and address of at least one member or manager of the limited liability company:		
	Micole Hotten 531	N. 6th Street Payette 11	
•		8366Y	
	<del></del>		
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5. Mailing address for future correspondence (annual report notices):  P.O. Box 42 Payette (D 8366)			
6. F	uture effective date of filing (optional):		
-	ature of organizer(s). (An organizer is a member, or	is	
acung	in behalf of a infinite or members).	Secretary of State use only	
Signature			
ı ype	d Names - Micole Holten	le l	
Signa	ature	IDAHO SECRETARY OF STATE 09/28/2009 05:00	
Typed Name:			

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