

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JAN 27 AM 8: 54

1. The name of the	he limited liability compar	SECRETARY OF STATE	
	Luis-Miguel		
2. The complete s	street and mailing addres 264 W Colches	sses of the initial des ster Dr. Eagle, ID 83616	
(Street Address)		<u></u>	
(Malling Address if d	different than street address)	<u>: </u>	
	complete street address	of the registered ag	ent:
Luis-Miguel	Molinero-Burilio	284 W Colchester Dr. Eagle, ID 83816	
(Name)	(8	Street Address)	
The name and company:	address of at least one r	_	
i pile. Affense	<u>Name</u> el Molinero-Burillo	Address. 264 W Colchester Dr. Eagle, ID 83616	
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	s for future corresponder 264 W Colches	nce (annual report no ster Dr. Eagle, ID 83616	
6. Future effective	e date of filing (optional):		
PIIOUUTE	and the second second		
	Zer(s). (An organizer is a me	mber, or is	
acting in behalf of a me	emper or members).		Secretary of State use only
Signature	700	C ONL PERMO	
Typed Name:	Luis-Miguel Molinero-Burillo		
		Compliant L.C. Terration Revised 07/2006	and the second second second second second
Signature		OTHER DE	
Typed Name:		Rewl	61/27/2010 05:00 PK: 1917 PT: 21/200 05:00
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