



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
10 JUN 30 AM 10:51

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

GREATER BENEFITS 4 U LLC

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

987 E KINGSFORD DR

(Street Address)

MERIDIAN, IDAHO 83642

(Mailing Address, if different than street address)

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

ROY L PHILLIPS

(Name)

987 E KINGSFORD DR, MERIDIAN, ID 83642

(Street Address)

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

Name

Address

ROY L PHILLIPS

987 E KINGSFORD DR, MERIDIAN, ID 83642

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

987 E KINGSFORD DR, MERIDIAN, IDAHO 83642

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

Signature of organizer(s) (An organizer is a member, or is acting in behalf of a member or members).

Signature _____

Typed Name: ROY L PHILLIPS

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
06/30/2010 05:00
CK: 5033 CT: 82270 BH: 1228810
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