

CERTIFICATE OF ORGANIZATION ILED EFFECTIVE (Instructions on back of application)

(Work of approacher)			
1.	The name of the limited liability com	npany is: SEORETARY OF STATE STATE OF IDAHO ETB6 LLC	
2.	The complete street and mailing addresses of the initial designated office: 4595 TAHOE PLACE CHUBBUCK IDAHO 83203 (Street Address)		
	(Mailing Address, if different than street address)		
3.	3. The name and complete street address of the registered agent:		
	JAKE HUGHES	4595 TAHOE PLACE CHUBBUCK IDAHO 83203	
	(Name)	(Street Address)	
4.	company:		
	<u>Name</u>	Address	
	JAKE HUGHES	4595 TAHOE PLACE CHUBBUCK IDAHO 83203	
		•	
5.	Mailing address for future correspondence (annual report notices):		
	4595 TAHOE PLACE CHUBBUCK ID 832	•	
	4330 TATIOL FEAGL GROBBOOK IS 602	VE	
6.	6. Future effective date of filing (optional):		
_	nature of a manager, member or son.		
•	0 1 1 1 1	Secretary of State use only	
Signature 400 7 Value			
Тур	ed Name: JAKE HUGHES		
,			
Sig	nature	IDAHO SECRETARY OF STATE US/23/2012 US: 90	
_	ed Name:	CK: 1451 CT: 278712 BH: 1325389 1 @ 188.98 = 198.88 ORGAN LLC # 2	

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