

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE I IMITED LIABILITY COMPANY

	(Instructions on back	to of application)
1.	The name of the limited liability cor	ompany is: SECRETARY OF STATE STATE OF IDAHO DocuProcessing, LLC
2.	The complete street and mailing ad 1887 West 5000 North, Rexburg, Idaho (Street Address)	ddresses of the initial designated/principal office: 83440
3.	(Mailing Address, if different than street address)  The name and complete street address of the registered agent:	
	Janell Klingler	1887 West 5000 North, Rexburg, Idaho 83440
	(Name)	(Street Address)
4.	The name and address of at least of company:  Name  Janell Klingler	one member or manager of the limited liability  Address  1887 West 5000 North, Rexburg, Idaho 83440
5.	Mailing address for future correspor Janell Klingler, 1887 West 5000 North, Ro	· · · · · · · · · · · · · · · · · · ·
6.	Future effective date of filing (option	nal):
_	nature of a manager, member or son.	rauthorized
Sigr	nature	Secretary of State use only

cert\_org\_lic Rev. 07/2010

Signature\_\_\_ Typed Name: \_\_\_\_\_ IDAHO SECRETARY OF STATE 10/12/2010 05:00 CK: 1282 CT: 251936 BH: 1242655 1 8 100.00 = 180.00 ORGAN LLC # 2