

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANYFILED EFFECTIVE

(Instructions on back of application) 09 NOV 16 AM 8: 47

1. The name of the limited liability company is:	SECRETARY OF STATE STATE OF IDAHO
2. The complete street and mailing addresses of the initial des 4355 Emerald St. 190 Boise I (Street Address)	ignated/principal office:
(Mailing Address, if different than street address)	
3. The name and complete street address of the registered agent:	
Grea Wilson 4355 Finera (Name) (Street Address)	1d St. 190 Boise ID 837
The name and address of at least one member or manager of the limited liability company:	
Greavilson 4355 Emerala Ste	190 Base IA 83706
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5. Mailing address for future correspondence (annual report notices):	
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).	
	Secretary of State use only
Typed Name: Gree WILSON	
Signature	IDANO SECRETARY OF STATE 11/16/2009 65:00 CK: 334477 CT: 172899 BH: 1195369 1 9 188.88 = 188.88 ORGAN LLC # 2
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