

Typed Name: _____

CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

7012 MAR -6 PH 1: 40

W111744

1.	The name of the limited liability company is: Mac Consulting Services L.L.C.	
2.	The complete street and mailing addresses of the initial designated office: 2900 W.Pleasanton Ave (Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	Jacqueline Bennett 2900 W Pleasanton Ave (Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:	
	Jacqueline Gennett 2900 W Pleasanton Ave	
5.	Mailing address for future correspondence (annual report notices): 2900 W Pleasanton Ave. Boise IIO 83702	
6.	Future effective date of filing (optional):	
Signature of a manager, member or authorized person.		
	nature Jaqueline Bennett ed Name: Jacqueline Bennett IDANO SECRETARY OF STATE 93/96/2912 95:00	
Sig	CK: 924343 CT: 172099 BH: 1313796 nature1 @ 100.00 = 100.00 ORGAN LLC # 2	

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