



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2012 SEP 24 AM 10:02  
SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Saint Michael's Consulting, LLC

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

15940 W Summerfield Rd, Post Falls ID 83854

(Street Address)

(Mailing Address, if different than street address)

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

Robert A. Darakjy

(Name)

15940 W Summerfield Rd Post Falls ID 83854

(Street Address)

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

Name

Address

Robert A. Darakjy

15940 W Summerfield Rd Post Falls ID 83854

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

15940 W Summerfield Rd Post Falls ID 83854

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Robert Aaron Darakjy

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
09/24/2012 05:00  
CK: 1629 CT: 274561 BH: 1348965  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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