

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

11 FEB 14 AM 8: 1

The name of the limited liability company is:		SECRETARY OF STATES OF IDAHO	
	Billo, LLC.	Strate OF IDAHO	
The complete street and ma	niling addresses of the initial de	esignated/principal office:	
(Street Address)			
(Mailing Address, if different than street	address)		
. The name and complete str	eet address of the registered a	agent:	
Bill Mogensen	11652 W Ardyce St., Bo	11652 W Ardyce St., Boise, Idaho 83713	
(Name)	(Street Address)	(Street Address)	
. The name and address of a company:	t least one member or manage	er of the limited liability	
<u>Name</u>		<u>Address</u>	
Bill Mogensen	11652 W Ardyce St., Bo	11652 W Ardyce St., Boise, Idaho 83713	
Lori Mogensen	11652 W Ardyce St., Bo	11652 W Ardyce St., Boise, Idaho 83713	
-	orrespondence (annual report	notices):	
11652 W Ardyce St., Boise, Idal	no 83/13		
. Future effective date of filing	g (optional):		
ignature of a manager, mer	nber or authorized		
erson.		Secretary of State use only	
ignature Sura			
ped Name: Bill Mogensen			
		IDANO SECRETARY OF STATE 02/14/2011 05:00	
ignature		CK: 605779 CT: 172099 BH: 1259089 1 0 100.00 = 100.00 ORGAN LLC # 2	
yped Name:		·	