



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 OCT -9 PM 12:51

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Online Income Solutions LLC.

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

1533 N. Milwaukee Ave. Boise, ID 83704 #182
(Street Address)

(Mailing Address, if different than street address)

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

Gary B. Gilgen
(Name)

1116 So. Vista Ave.
(Street Address) Boise, ID 83705

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

Name	Address
<u>Carl Sharp</u>	<u>6505 So. Light Horizon Way</u> <u>Boise, ID 83709</u>
<u>Gary B. Gilgen</u>	<u>1116 So. Vista Ave Boise, ID 83705</u>

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

1533 N. Milwaukee Ave #182 Boise, ID 83704

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature [Signature]

Typed Name: Gary B. Gilgen

Signature _____

Typed Name: _____

Secretary of State use only
IDAHO SECRETARY OF STATE
10/09/2014 05:00

CK: CASH CT: 259554 BH: 1444620
10 100.00 = 100.00 ORGAN LLC #2

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