FILED EFFECTIVE

	CERTIFICATE OF O		10
ALC: TO	(Instructions on back of	of application)	SECRETARY OF STATE STATE OF IDAHO
1. The name of the limited liability com		pany is:	STATE OF IDANO
3	Mozy, LLC		
2. Tł	2. The complete street and mailing addresses of the initial designated office:		
	93 Townsend Gulch Rd., Bellevue, ID 83313		
	Street Address) 338 Airport Rd., Destin, FL 32541 Mailing Address, If different than street address)	- <u>-</u>	
3. TI	te name and complete street addre	ess of the regist	ered agent:
,	National Registered Agents, Inc.	921 S Orchard Street, Suite G, Boise, Idaho 83705	
	Name)	(Street Address)	
`1 • •	Name Robert L. Christensen	P.O. Box 1659, De	Address stin, FL 32540
	lailing address for future correspond P.O. Box 1659, Destin, FL 32540	dence (annual	eport notices):
6. F	uture effective date of filing (optiona	al):	
Signa perso	ature of a manager, member or	authorized	
00,00	F. MAN .		Secretary of State use only
Туре	d Name: Robert L. Christensen		IDAHO SECRETARY OF STATE 07/07/2014 05:00 CK:PREPAID CT:278665 BH:14321 10 100.00 = 100.00 ORGAN LLC
	ture		$10\ 20.00\ =\ 20.00\ \text{Expedite C}$
i ype	d Name:		
9/21/2012	¢	art_org_8c Ray. 07/2010	W139686

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