



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

SEP -2 AM 9:26

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Nielsen Enterprises LLC

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

510 East 17th Street, PMB 150, Idaho Falls, ID 83404

(Street Address)

(Mailing Address, if different than street address)

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

Brian Nielsen

(Name)

510 East 17th Street,

(Street Address)

Idaho Falls, ID 83404

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

NameAddress

Brian Nielsen

510 East 17th Street, Idaho Falls, ID 83404

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

510 East 17th Street, Idaho Falls, ID 83404

6. Future effective date of filing (optional):

N/A

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Brian NielsenTyped Name: Brian Nielsen

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
09/02/2008 05:00
CK: 113 CT: 229335 BH: 1133998
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