

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 APR 22 PM 4: 07

FILED EFFECTIVE

	(Instructions on ba	ack of application)	OLUNE IAR I SERVE
1.	The name of the limited liability company is:		STATE OF IDAHO
	Brush of Genius, LLC		
2.	The complete street and mailing a 205 North Tenth Street, Suite 300, Boi (Street Address)		initial designated office:
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Rebecca B. Wood (Name)	205 North Tent (Street Address)	h Street, Suite 300, Boise, ID 83702
4.	The name and address of at least one member or manager of the limited liability company:		
	Name Rebecca B. Wood, Manager	Address 205 North Tenth Street, Suite 300, Boise, ID 83702	
		·	
5.	Mailing address for future corresp 205 North Tenth Street, Suite 300, Boi	•	report notices):
6.	Future effective date of filing (opti	ional):	·
Sigi pers	nature of a manager, member	or authorized	
•	^		Secretary of State use only
_	nature Rebucca B. Wo		IDAHO SECRETARY OF STATE
Тур	ed Name: Rebecca B. Wood		04/22/2014 05:00 CK:3005 CT:115172 BH:14214 16 100.00 = 100.00 ORGAN LLC
Sign	nature		the same of the

W137010

Typed Name: ____