



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Virtual Concepts LLC

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

1933 S Doe Creek Way Boise Idaho 83709

(Street Address)

(Mailing Address, if different than street address)

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

Alfred Smtih

1933 S Doe Creek Way Boise Idaho 83709

(Name)

(Street Address)

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

**Name**

**Address**

Alfred Smith

1933 S Doe Creek Way Boise Idaho 83709

Marilyn M Smith

1933 S Doe Creek Way Boise Idaho 83709

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

1933 S Doe Creek Way Boise Idaho 83709

6. Future effective date of filing (optional): \_\_\_\_\_

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

Signature

*Marilyn M. Smith*

Typed Name:

Marilyn M Smith

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE  
11/04/2008 05:00  
CK: 7932 CT: 231169 BH: 1143083  
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