

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY2 JAN 17 AM 9: 40

TI TO	(Instructions on back	of application)	SECRETARY OF STATE STATE OF IDAHO
1. The name of	the limited liability con	mpany is:	STATE OF IDAHU
		Elite Lacrosse, LLC	
•	e street and mailing ad reek Road, Boise, ID 8371		al designated office:
, ,			
	if different than street address)		and a name
3. The name an	d complete street add	ress of the register	ed agent:
Jon Mundy		48 E. Indian Creek	Road, Boise, ID 83716
(Name)		(Street Address)	
4. The name an company:	d address of at least o	one member or ma	nager of the limited liability
	<u>Name</u>		<u>Address</u>
Jon Mundy (M	anager)	48 E. Indian Creek	Road, Boise, ID 83716
	tion of the second of the seco	the street of the	
		:	
·		•	
		···	
			
_	ess for future correspo reek Road, Boise, ID 8371	,	port notices):
6. Future effecti	ve date of filing (option	nal):	······································
-	manager, member o	r authorized	
person.	KZ		Secretary of State use only
Signature			
Typed Name: Mic	chael E. Band, Member	· ·	
Cianatura	to the way of the		IDAHO SECRETARY OF STATE
Signature			01/17/2012 05:804 CK: 1322 CT: 26596 BH: 1396326

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