



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 FEB 28 PM 3:19

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Christiansen Communications, LLC

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

6135 S. Schooner Place, Boise, ID 83716

(Street Address)

(Mailing Address, if different than street address)

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

Darla J. Christiansen

(Name)

6135 S. Schooner Place, Boise, ID 83716

(Street Address)

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

Name

Address

Darla J. Christiansen

6135 S. Schooner Place, Boise, ID 83716

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

6135 S. Schooner Place, Boise, ID 83716

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature *Darla Christiansen*

Typed Name: Darla Christiansen

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/28/2013 05:00
CK: 2772 CT: 200009 BH: 1362362
1 @ 100.00 = 100.00 ORGAN LLC # 2

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