

Signature:

Rev. 08/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2016 FEB -3 AM 8: 45

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code

K		Filing fee: \$100 type	d, \$120 not typed	SECRES 46	
		Complete and submi	it the application in <u>duplicat</u>	SECRETARY OF STATE STATE OF IDAHO	
1.	The name of the limited liability company is:				
	360 Immersive, LLC				
	<u> </u>	(Remember to include the wor	ds "Limited Liability Company." "Limit	ed Company," or the abbreviations L.L.C., LLC, or LC)	
2.		nplete street and mai Hays Street	iling addresses of the prin	cipal office is:	
	(Street Addre				
	Boise, ID 832702 (Mailing Address. if different)				
3.	The name and complete street address of the registered agent:				
	David Cleverdon 507 W. Hays Street, Boise, ID 83702 (Name) (Address)			reet, Boise, ID 83702	
	(name)		(Address)		
4.	The name and address of at least one governor of the limited liability company:				
	Jennifer Lastra 507 W. Hays Street, Boise, ID 83702		·		
	(Name) (Address)				
	(Name)		(Address)		
	(Name)	(Address)			
	(Name)		(Address)		
	Malling address for fatigue company and and formula				
5.	Mailing address for future correspondence (annual report notices): 507 W. Hays Street, Boise, ID 83702				
	(Address)				
_		organizer(s).		Secretary of State use only	
Printed Name: David Cleverdon					
Signature:				1DAMO SECRETARY OF STATE 02/03/2016 05:00	
				CK: 6693 CT: 292648 BH: 1511831	
D:				16 100.00 = 100.00 ORGAN LLC #2	
-11	nted Name) .			

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