

Printed Name:

Signature:

Rev. 07/2015

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00.

2015 JUL 17 AM 8: 42

Complete and submit the application in duplicate.

16 20.00 = 20.00 EXPEDITE C #3

w153909

| | The series of the Contact Colors | | SECRETARY OF STATE STATE OF IDAHO | | |
|------|--|---|--------------------------------------|----------------|----------------------------|
| 1. | | Company is: OLYTU SEXVICES LLI "Limited Liability Company," "Limited Compa | <u></u> | | |
| 2. | The complete street and mailing 105 N. Dort St (Street Address) | ng addresses of the principal o | office is: Postfalls I | (State) | 83884 (Zipcode) |
| | (Mailing Address. if different) | | (City) | (State) | (Zipcode) |
| 3. | The name and complete street address of the registered agent: | | | | |
| | Randy Young | 106 N. Dart St. | Post Falls | (State) | 7375 <u>U</u> (Zipcode) |
| 4. | The name and address of at least one governor of the limited liability company: | | | | |
| | Kandy Young | 106 N. Dart St. | Post falls | (State) | (Zipcode) |
| | (Name) | (Address) | (City) | (State) | (Zipcode) |
| | (Name) | (Address) | (City) | (State) | (Zipcode) |
| | (Name) | (Address) | (City) | (State) | (Zipcode) |
| 5. | Mailing address for future correspondence (annual report notices): 106 N1 Dart Ct Doct Falls TD 88861 | | | | |
| | (Address) | | (City) | (State) | (Zipcode) |
| Sig | nature of organizer(s). | <u> </u> | | _ - | |
| Prir | nted Name: Randy you | Secretary of State use only IDAHO SECRETARY OF STATE 07/17/2015 05:00 CK:1069 CT:312480 BH:1484272 16 100 00 = 100 00 ORGAN LLC #2 | | | |