

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 AUG 22 AM 8: 45

1. The name of the limited liability com	npany is:		SECRETARY CONSTATE
Alligator Ar	ms L	LC	STATE OF IDAHO
2. The complete street and mailing addresses of the initial designated office:			
1685 W. Staples			
(Street Address) Post Falls	10 8	23854	
(Meiling Address, if different than street address)			
3. The name and complete street address of the registered agent:			
Jayme Hall (Name)	5097	n. Buck	ng Center Dr
(rane) ·	(Street Addre	ss) Coew	MALENE 110 8 3815
4. The name and address of at least one member or manager of the limited liability company:			
Name Chad Hall	11085	Add W. Stand	iress
Chad Hall Jayme Hall	1000	CI O	LS MIC, TACT FALLS IP 83834
July me Hall	2110 5	. Steen R	d Spokane WA 99037
	<del></del>		
5. Mailing address for future correspondence (annual report notices):			
Same as above	, <del>-</del>	Stuples A	tre
6. Future effective date of filing (optional):			
Signature of a manager, member or a person.	authorized	I	
person.		;	Secretary of State use only
Signature	747		
Typed Name: Jayre Hall			
Signature			1DAHO SECRETARY OF STATE  08/22/2013 05:00  CX: 3224 CT: 28366 20:5:00
Typed Name:	<del></del>	i	180.00 = 100.00 ORGAN II C 13
			20.00 EXPEDITE C # 3