



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2009 JUL 13 PM 1:32

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Electronic Dreams Professional, L.L.C.

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

6286 North Park Meadow Wy # 204 Boise, ID 83713

(Street Address)

PO Box 4004 Boise ID 83711

(Mailing Address, if different than street address)

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

Mason Sessions

(Name)

1284 N. Wildwood. Apt. 103. Boise, ID. 83713

(Street Address)

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

Name

James McQuoid

Address

P.O. Box 4004. Boise, ID. 83711

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

P.O. Box 4004. Boise, ID. 83711

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

James McQuoid

Signature

Typed Name:

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
07/13/2009 05:00
CK: 200690 CT: 172099 DH: 1170612
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