



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2014 FEB 27 AM 8:54

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Fusion Fjord L.L.C.

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

1918 E. Kamay Drive Meridian, Idaho 83646

(Street Address)

(Mailing Address, if different than street address)

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

Stuart R. Simpson

(Name)

1918 E. Kamay Drive Meridian, ID 83646

(Street Address)

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

Name

Address

Stuart R. Simpson

1918 E. Kamay Drive Meridian, ID 83646

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

1918 E. Kamay Drive Meridian, ID 83646

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

Signature of a manager, member or authorized person.

Signature Stuart R. Simpson

Typed Name: Stuart R. Simpson

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/27/2014 05:00
CK: 104 CI: 293507 BH: 1412529
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