

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 FEB -3 AM 8: 17

1.	The name of the limited liability company is: SECRETARY OF STATE STATE OF IDAHO
2.	The complete street and mailing addresses of the initial designated/principal office: 3050
3.	The name and complete street address of the registered agent:
	Melusalitys 8544 W Salt Cruk Of Bousi (Street Address) 85709
4.	The name and address of at least one member or manager of the limited liability company:
	Mai LIN Ethnide P.D. BOX 190038 Bo. Id 83719
5.	Mailing address for future correspondence (annual report notices):
6.	Future effective date of filing (optional):
	nature of a manager, member or authorized son.
	nature Manage Ma
	IDAHO SECRETARY OF STATE
Тур	cert_org_lic Rev. 07/2010