CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

_	The many of the limited liability com	anany is:	October 1987 Commence
1.	The name of the limited liability con	oma Billing Services	LLC Shing of the Side
2.	The complete street and mailing addresses of the initial designated office: 789 Von Elm Drive, Blackfoot Idaho 83221 (Street Address)		
3.	(Mailing Address, if different than street address) The name and complete street address of the registered agent:		
	Deborah Krami (Name)	789 Von Elm Drive, (Street Address)	Blackfoot Idaho 83221
4.	The name and address of at least of company: Name Deborah Kraml	one member or manager of the limited liability Address 789 Von Elm Drive, Blackfoot Idaho 83221	
5.	Mailing address for future correspondence (annual report notices): 789 Von Elm Drive, Blackfoot ID 83221		
6.	Future effective date of filing (optio	nal):	
	gnature of a manager, member o	r authorized	
Si	gnature <u>Schoramica</u> ped Name: <u>Deborah Krami</u>	ul	Secretary of State use only
	gnature	1	IDAHO SECRETARY OF STATE 61/09/2012 65:00 CK: 1677 CT: 265748 BH: 1385189 1 8 180.88 = 188.80 ORGAN LLC # 2 1 8 26.88 = 28.88 EXPEDITE C # 3

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