

Printed Name: Morgari Noble

Signature:\_\_\_\_

Printed Name: -

Rev. 11/2015

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## **FILED EFFECTIVE**

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2018 JUL -5 AM 9: 57

The name of the limited liability com	pany is:	SECRETARY OF STA STATE OF IDAHO
Elljada Productions LLC		
(Remember to include the words "Lim	ited Liability Company," "Limited Company,"	or the abbreviations L.L.C., CLC, or LC)
The complete street and mailing add	fresses of the principal office is:	
784 S. Clearwater Loop STE B Post Falls I	D 83854	
(Street Address)		
Mailing Address, if different)		
The name of the registered agent ar	nd the street address of the regis	stered agent:
-	784 S. Clearwater Loop STE	
Northwest Registered Agent, LLC.	(Address cannot be a post office box or post	
	fractions carried by a bigg office out in franc	
Mujahed Suboh Name)	784 S. Clearwater Loop STE I (Address)	
	,	
(Name)	(Address)	
· .		
Name)	(Address)	
		•
Name)	(Address)	
Mailing address for future correspor	ndence (annual report notices):	
784 S. Clearwater Loop STE B Post Falls	ID 83854	
(Address)		
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W 204844

1DAHO SECRETARY OF STATE 07/05/2018 05:00

CK:PREPAID CT:238717 BH:1652063 10 100.00 = 100.00 ORGAN LLC #2