

Typed Name: \_

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 OCT 22 AN 10: 05

SECRETARY OF STATE STATE OF IDAHO

. The name of the limited liability com	pany is:	STATE OF IDANU
	eliance Consu	ulting, LLC
. The complete street address, and maprincipal office:	ailing addre	ess if different, of the initial designated/
10818 Kres	t Ct., Hayden	, Idaho 83835
. The name of the commercial register address of the non-commercial register.		
National Registered Agents, Inc.	1423 Tyrell L	ane Boise, ID 83706 County of Ada
The name and address of at least or company:	ne member	
<u>Name</u>	<u>Address</u>	
Rhonda Richelle Reed		818 Krest Ct., Hayden, Idaho 83835
5. Mailing address for future correspon	ndence (anr	nual report notices):
		den, Idaho 83835
6. Future effective date of filing (option	nal):	
Signature of an organizer(s). (An organize or is acting in behalf of a required, and existing,		er
or members).		Secretary of State use only
Signature		3.06 19.05 1
Typed Name: Karmelia Fredrick, Assistant	Secretary	IDAHO SECRETARY OF STATE  10/22/2008 05:0  CK: 286386 CT: 167623 BH: 1142  1 9 100.00 = 100.00 ORGAN LLC
Signature		1 9 100.00 = 108.08 ORGAN LL

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