

Signature_

Typed Name: ____

CERTIFICATE OF ORGANIZATION

	(Instructions on b	ack of application)	OF OPETA (See
he nam	e of the limited liability	company is:	SECRETARY OF STATE STATE OF IDAHO
	iele Investments, Ll	• •	ON THE OF IDATIO
			at designate dissipate office:
			al designated/principal office:
(Street Add	Broadway, Suite ?	517, DOISC, 10am	0 85/05
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	idress, if different than street addre		
he nam	ne and complete street a	_	
Buck	ner A. Harris	Olan kumalina	y Suit 314, borse Id. 837
(Name)	ter 14. Harris	(Street Address)	1, mass, 1, 2000 24. 017.
he nam	ne and address of at lea	ist one member or ma	nager of the limited liability
company	y:		•
2.	Name	0.1.	Address
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	And the second s		
	train .		
			
anilia M	address for future corre	enondence (annual te	nort notices):
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960 Future e	Broudway, Suit 3	ptional):	

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