



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 JAN -6 AM 9:40

(Instructions on back of application)

 SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

NorthWest Security Solutions LLC

2. The complete street and mailing addresses of the initial designated office:

2309 N. Rawhide Ridge Rd. Post Falls, ID. 83854

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Christopher T. Donahue

(Name)

2309 N. Rawhide Ridge Rd. Post Falls, Idaho. 83854

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

<u>Name</u>	<u>Address</u>
Christopher T Donahue	2309 N Rawhide Ridge-Rd Post Falls ID 83854
_____	_____
_____	_____
_____	_____
_____	_____

5. Mailing address for future correspondence (annual report notices):

2309 N. Rawhide Ridge Rd. Post Falls, Idaho. 83854

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Christopher T. Donahue
Typed Name: CHRISTOPHER T. DONAHUE

Signature _____
Typed Name: _____

Secretary of State use only

W 132831

IDAHO SECRETARY OF STATE
01/07/2014 05:00
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