

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 09 APR 29 AM 8: 11 (Instructions on back of application) 1. The name of the limited liability company is: 2. The complete street and mailing addresses of the initial designated/principal office: rai g Address, if different than street address) The name and complete street address of the registered agent: 3101 W. Lone M. 7 4. The name and address of at least one member or manager of the limited liability company: 5. Mailing address for future correspondence (annual report notices): 6. Future effective date of filing (optional): Signature of organizer(s). (An organizer is a member, or is

acting in behalf of a member or members

Signature * Typed Name: Mic

Typed Name: Martha

Secretary of State use only

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