

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY | JAN 8:31

10.70	(Instructions on b	ack of application)	DESCRIPTION OF STATE
1. The nam	e of the limited liability	company is:	SECTION BY OF STATE STATE OF IDAHO
		afelock Alarm Systems LL	•
	plete street and mailing . Emerald Street, Suite 100,		al designated/principal office:
(Street Add	dress)		
(Mailing Ad	dress, if different than street address	ss)	
3. The nam	ne and complete street a	ddress of the register	ed agent:
Robert S	. Hosac	10369 W. Emerald	Street, Ste. #100, Boise, ID 83709
(Name)		(Street Address)	
4. The nam company		st one member or ma	nager of the limited liability Address
Robert S	. Hosac	10369 W. Emerald	St., Ste. #100, Boise, ID 83709
-			
-			
5 Mailing :	address for future corres	nondence (annual rer	nort notices):
•	. Emerald St., Ste. 100, Bois		501t 110ti000).
6. Future e	ffective date of filing (op	tional):	
Signature o person.	f a manager, member	or authorized	
50,0011.	82018		Secretary of State use only
Signature	1) cons Usos	512	
Typed Name	Robert S. Hosac		
			IDAHO SECRETARY OF STATE 01/07/2011 05:0

CK: 1672 CT: 185344 BH: 1254288 1 0 180.08 = 108.00 DRGAN LLC # 2

cert_org_lic Rev. 07/2010

Typed Name: _____

W99432