



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 OCT -9 PM 4:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Oromia Taxi LLC

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

201 E Kiabab Trail St Meridian ID 83646
(Street Address)

(Mailing Address, if different than street address)

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

Ibrahim Hassan 201 E Kiabab Trail St Meridian
(Name) (Street Address) ID 83646

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

Name	Address
<u>Ibrahim Hassan</u>	<u>Same as # 2</u>
<u>Senji Abera</u>	<u>So >> >></u>
_____	_____
_____	_____
_____	_____

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

Same as # 2

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

Signature of a manager, member or authorized person.

Signature

Typed Name:

Senji Abera

Signature

Typed Name:

Ibrahim Hassan

Secretary of State use only

IDAHO SECRETARY OF STATE
10/10/2012 05:00
CK: CASH CT: 275098 BH: 1343041
1 @ 100.00 = 100.00 ORGAN LLC # 2

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