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CERTIFICATE OF ORGANIZATION FILED EFFECTIVE	
(Instructions on back of application) 2013 SEP -3 AM 10: 12
1. The name of the limited liability company is: <u>WIRELESS</u> CLOSEDUTE LCC	SECRETARY OF STATE
2. The complete street and mailing addresses of the <u>1972</u> W. OBIT DR. Bois	initial designated office:
(Street Address) (Mailing Address, if different than street address)	
The name and complete street address of the registered agent:	
Kristing Babichenku 7972 W (Name) (Street Address)	Orbit Dr. BOISE ID 83709
 The name and address of at least one member or manager of the limited liability company: 	
Name KRISTINA BABICNONICO 7972 M	Address D. O.Z.B.IT DR. BOISE, EP 8370
5. Mailing address for future correspondence (annual report notices):	
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized person.	
Signatura	Secretary of State use only
Signature Typed Name:	
Signature Hugura	IDAHO SECRETARY OF STATE 09/03/2013 05 :00 CK: 5038 CT: 278888 BH: 1388557
Typed Name: Kristing Babichenico	1 # 100.00 = 100.00 ORGAN LLC # 2 W 12.8827
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