State of Idaho

Office of the Secretary of State

CERTIFICATE OF REGISTRATION OF FUNKTIONAL BOOKKEEPING & PAYROLL, INC.

File Number C 209430

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: April 4, 2016



CRETARY OF STATE

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FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in <u>duplicate</u>.

| 2016 APR -4 | AM | 9 : | 12 |
|-------------|------|------------|----|
| SECRETARY | OF S | TAT | E |
| STATE OF | IDAH | O | |

1. The name of the entity is: Funktional Bookkeeping & Payroll, Inc.

| 2. | The name which it shall use in Id | _{aho is:} <u>Funktic</u> | onal Bookkeepi | ng & P | Payroll Inc , | | | |
|---|---|---|--------------------------|------------------------|--|---|--|--|
| 3. Select the type of entity you wish to register: (Enter a name here, only if you are required to adopt an alternate name) | | | | | | | | |
| | Business Corporation | | | | | | | |
| | Business Corporation General Partnership | | | | | | | |
| | Limited Liability Partnership | | | | | | | |
| | Limited Liability Company | | | - | , or Common-law Business Trust | | | |
| | C Other: | | | | | | | |
| | Other: (Use "Other" only if your fore | lign entity type is no | t listed above, and enti | er the type | e here.) | - | | |
| 4. | Jurisdiction of formation: Colora | | | | | | | |
| 5. | (Provide the domestic jurisdiction where the entity was formed) 5. The address of its principal office is: | | | | | | | |
| | 2404 Jorden Ln Filer, ID 8 | | | | | | | |
| | (Street Address) | | | ,,a.u. | | - | | |
| | | 148 Blue Lakes Blvd N #360 Twin Falls, ID 83301 | | | | | | |
| | (Mailing Address, if different) | | | | | | | |
| 6. | The address of its domestic princ | ipal office (if req | uired by the laws | of the ju | urisdiction of formation) is: | | | |
| | | | | | | | | |
| | (Street Address) | | | | | | | |
| | (Mailing Address, if different) | | | | | | | |
| 7 | The meiling address to which so | | | 1 | | | | |
| 7. | The mailing address to which cor | respondence sn | ouid be addressed | х, ir aine | erent from item 5, is: | | | |
| | (Address) | | | | | | | |
| 8. | Name and street address of regis | stered agent in lo | daho. | | | | | |
| | Joyce Ann Funk | D 83328 | | | | | | |
| | Joyce Ann Funk 2404 Jorden Ln Filer, ID 83328 (Name) (Address) | | | | | | | |
| 0 | The name perceity and mailing | | | | | | | |
| 9. | The name, capacity, and mailing | | • | | | | | |
| | Joyce Ann Funk P (Name) | resident | | kes Bl | lvd N #360 Twin Falls, ID 83301 | | | |
| | (Name) | (Capacity) | (Address) | | | | | |
| | (Mamo) | Conoritic | 7.8 al store of the | | ···· | | | |
| | (Name) | (Capacity) | (Address) | | | _ | | |
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| | | | | only | IDAHO SECRETARY OF STATE | | | |
| | | | | l õ g | 04/04/2016 05:00 CK:6060 CT:322761 BH:1522056 | | | |
| | Typed Name: Joyce Ann Funk | | | 1 1 1 | 100.00 = 100.00 FOR REG ST #2 | | | |
| | and the for | 2 K | | Sta | | | | |
| | Signature: | m_ | | | C209430 | | | |
| | Capacity: President | | | Secretary of State use | | | | |
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| Rev, | 08/2015 | | |] | | | | |

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

FUNKTIONAL BOOKKEEPING & PAYROLL, INC.

is a

Corporation

formed or registered on 06/01/2000 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20001105392.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/21/2016 that have been posted, and by documents delivered to this office electronically through 03/24/2016 @ 15:17:50.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 03/24/2016 @ 15:17:50 in accordance with applicable law. This certificate is assigned Confirmation Number 9566806



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Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. <u>Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate</u>. For more information, visit our Web site, http:// www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."