

## CERTIFICATE OF ORGANIZATION MITED LIABILITY COMPANY

Click here to clear form.

	LIMITED LIABILITY COMP.	2014 MAY 27 AM 9: 37
	(Instructions on back of application	Oronorman
1. The n	name of the limited liability company is:	OEUNE JOSEPH STATE
	MANAGATE STUDIOS LLC	UMICIA 金納O
2. The c	complete street and mailing addresses of the	initial designated office:
	WILD ROSE LN, SUN VAILEY, ID, 8330	53
Po	t Address)  BOX 1531, Kc+chum, ID, 83340  ng Address, if different than street address)	
3. The r	name and complete street address of the reg	istered agent:
TA:		SE LN, SUN VAILLY, ID, 83353
4. The r	<del>-</del>	
	Name	Address
<u> 1 A</u>		NITO ROSE LN, SUN VAILLY, ID, 83353
BR	ET MONEE (MANNGING MEMBER) 3 WIL	D ROSE LN, SUN VAILEY, ID, 83353
5. Maili	ng address for future correspondence (annua	al report notices):
	Box 1531, Ketchum, ID, 83340	
6. Futu	re effective date of filing (optional):	
-	re of a manager, member or authorized	
erson.		Secretary of State use only
Signatur	e Touslon McNee	IDAHO SECRETARY OF STATE
Гуреd N		05/27/2014 05:00
 -	DHW (	CK:1001 CT:297310 BH:142641 16 100.00 = 100.00 ORGAN LLC
Signatur	e Turner of the second of the	TG 100.00 - 100.00 OKGAN LLC
Typed N	lame: BRET MCNEE	

cert\_org\_lic Rev. 07/2010

W138297