



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 DEC 10 AM 9:18

1. The name of the limited liability company is:

LCS Consulting LLC

SECRETARY OF STATE
STATE OF IDAHO

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

111 S Ivy Street, Nampa, ID 83686

(Street Address)

(Mailing Address, if different than street address)

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

Elizabeth E McAllister

(Name)

111 S Ivy Street, Nampa, ID 83686

(Street Address)

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

Name

Address

Elizabeth E McAllister

111 S Ivy Street, Nampa, ID 83686

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

111 S Ivy Street, Nampa, ID 83686

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

Signature of a manager, member or authorized person.

Signature

Elizabeth E McAllister

Typed Name: Elizabeth E McAllister

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/10/2012 05:00
CK: 3814 CT: 277064 BH: 1350808
1 @ 100.00 = 100.00 ORGAN LLC # 2

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