



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 JUN -5 PM 4:39

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Reid Consulting, LLC

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

8091 W Grassland Ct, Boise, ID, 83704

(Street Address)

(Mailing Address, if different than street address)

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

Katie Reid

(Name)

8091 W Grassland Ct, Boise, ID, 83704

(Street Address)

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

Name

Address

Katie Reid

8091 W Grassland Ct, Boise, ID, 83704

Rand Reid

8091 W Grassland Ct, Boise, ID, 83704

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

8091 W Grassland Ct., Boise, ID, 83704

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Katie Reid

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

06/05/2015 05:00

CK:7043 CT:311047 BH:1478669

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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