



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 DEC 12 PM 4: 54

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

NIGHTLOGY ENTERTAINMENT LLC

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

2410 JORETTA BOISE ID 83704

(Street Address)

(Mailing Address, if different than street address)

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

KARL SHURTLEFF

(Name)

800 W. State St. Boise ID 83702

(Street Address)

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

Name

Address

HERMES GOVANTES

2410 JORETTA BOISE ID 83704

LYND TRAN

12869 W. ELM SPRING BOISE ID 83713

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

2410 JORETTA BOISE ID 83704

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: HERMES GOVANTES

Signature _____

Typed Name: LYND TRAN

Secretary of State use only

IDAHO SECRETARY OF STATE
12/13/2011 05:00
CK: CASH CT: 264383 BH: 1301483
1 @ 100.00 = 100.00 ORGAN LLC # 2

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