



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 NOV 12 AM 8:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Gofy LLC

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

3011 State St. Boise, ID 83703

(Street Address)

(Mailing Address, if different than street address)

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

All Day \$49 Idaho Registered Agent

(Name)

1011 N. 11th Coeur D'Alene, ID 83814

(Street Address)

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

Name	Address
Michael James	3011 State St. Boise, ID 83703

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

3011 State St. Boise, ID 83703

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

Signature of a manager, member or authorized person.

Secretary of State use only

Signature Michael James

Typed Name: Michael James

Signature _____

Typed Name: _____

IDAHO SECRETARY OF STATE
11/12/2010 05:00
CK: 14188822954 CT: 252782 BH: 1246826
1 @ 100.00 = 100.00 ORGAN LLC # 2

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