

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 MAR -9 PM 1:59

SECRETARY OF STATE STATE OF IDAHO

The name of the limited liability of	company is:		STATE OF	IDAH0
	Hopecore.	com LLC		
The complete street and mailing	addresses of	the initial d	esignated/principal office	 e:
	ain St. Suite #2	26 Boise ID 8	3702	
(Street Address)				
(Mailing Address, if different than street address	s)			<del></del>
The name and complete street ac	ddress of the	registered	agent:	
Jeremy D. Seick	910	) W. Main St.	Suite #226 Boise ID 83702	
(Name)	(Street Add	ireas)		
The name and address of at leas company:	t one membe	er or manag	er of the limited liability	
Name			Address	**
Jeremy D. Seick	910	0 W. Main St.	Suite #226 Boise ID 83702	·
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	<del></del>			
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Mailing address for future corresp	oondence (ar	nnual report	notices):	
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				7 4 .
Future effective date of filing (optional):			*	·
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gnature of organizer(s). (An organizer	is a member, o	ris		
ing in behalf of a member or members).			Secretary of State use only	
gnature 55-k		IK PIN		
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ped Name: Jeremy Seick		omsteart 3008		9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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