

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 AUG 21 PM 3: 06

SECRETARY OF STATE STATE OF IDAHO

	(Instructions on t	back of application	on) STATE OF IDAHO
1,	The name of the limited liability company is: AKAITIKKA, LLC		
2.	The complete street and mailing addresses of the initial designated office:		
	2500 Marilyn St., Pocatello, ID 83201		
	(Streel Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	A. Bruce Larson	2500 Marilyn St., Pocatello, ID 832-1	
	(Name)	(Street Addres	18)
	The name and address of at least one member or manager of the limited liability company:		
	Name		Address
	A. Bruce Larson	2500 Marilyπ St., Pocatello, ID 83201	
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	<u>*************************************</u>		
5 . I	Mailing address for future corre	•	ual réport notices):
	2500 Marilyn St., Pocatello, ID 8320	<u> </u>	
6. 1	Future effective date of filing (o	ptional):	
Sign pers	ature of a manager, membe	r or authorized	
p			Secretary of State use only
_	ature ! Dun	<u> </u>	
Туре	ed Name: A. Bruce Larson		10AHO SECRETARY OF STATE 08/21/2014 05:00
 .			CK:5088 CT:169988 BH:14383
_	Signature		16 100.00 = 100.00 ORGAN LLO
Type	ed Name:		10 20.00 = 20.00 EXPEDITE C

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