



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 NOV -7 AM 8:57

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Jodi M. Burke, LLC.

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

2914 W. Apperson Drive Coeur d'alene, ID 83815

(Street Address)

(Mailing Address, if different than street address)

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

Jodi M. Burke

(Name)

2914 W. Apperson Drive Coeur d'alene, ID 83815

(Street Address)

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

Name

Address

Jodi M. Burke

2914 W. Apperson Drive Coeur d'alene, ID 83815

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

2914 W. Apperson Drive - Coeur d'alene, ID 83815

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Jodi M. Burke

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
11/07/2012 05:00
CK: 1271 CT: 276027 BH: 1346822
1 @ 100.00 = 100.00 ORGAN LLC # 2

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