FILED EFFECTIVE CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 JUN 10 AM 9: 23

(Instructions on back of application)

•	STATE
 The name of the limited liability comp 	pany is: STATE OF IDAHO
Callahan I	Financial Services LLC
. The complete street and mailing addre	esses of the initial designated/principal office:
	/ay Suite 7 Hailey, ID 83333
(Street Address)	
(Mailing Address, if different than street address)	
. The name and complete street addres	ss of the registered agent:
Christopher R Callahan	106 Whipsaw Lane, Ketchum ID 83340
(Name)	(Street Address)
The name and address of at least one company: Name	e member or manager of the limited liability Address
Christopher R. Callahan	106 Whipsaw Lane, Ketchum ID 83340
autinus	
 Mailing address for future correspond 	dence (annual report notices):
· · · · · ·	Vay Suite 7 Hailey, ID 83333
 Future effective date of filing (optional 	il):
ignature of organizer(s). (An organizer is a n	member, or is
eting in behalf of a member or members).	Secretary of State use only
ignature Veritories C. C. L.	₩
yped Name: CHRISTOPHER R. CALLAN	HAN g
	1 Control of the secretary of state of the secretary of the secretary of state of the secretary o
ignature	55 IDAHO SECRETARY OF STATE
yped Name:	CK: 225 CT: 231403 BH: 122