



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 MAR 25 AM 10:18
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

TNT ACA, LLC

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

439 E. Shore Drive Suite # 100 Eagle, ID 83616

(Street Address)

(Mailing Address, if different than street address)

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

Aletheia Capital Advisors LLC

(Name)

439 E. Shore Drive Suite # 100 Eagle, ID 83616

(Street Address)

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

Name

Address

Aletheia Capital Advisors LLC

439 E. Shore Drive Suite # 100 Eagle, ID 83616

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

439 E. Shore Drive Suite # 100 Eagle, ID 83616

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Travis B. Hawkes

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
03/26/2013 05:00
CK: 11049 CT: 277017 BH: 1366289
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