CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 APR 28 PH 1326

SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

(IIIStruct	tions on back of app	mcation)	
1. The name of the limite	d liability company	is:	
	• • • •	OS, LLC	
. The complete street an	d mailing addresses	s of the initial designated/principal o	ffice:
	-	Ave Boise ID 83713	
(Street Address)	·		
(Mailing Address, if different the	n struct address)		
. The name and complet	te street address of	the registered agent:	
Alisher Alikhodja (Name)		11306 Goldenrod Ave Boise ID 83713 Address)	
(inchie)	(Ozac.		
The name and address company:	s of at least one mer	mber or manager of the limited liabil	îty
Nama		Address	
Alla Saprono	va	11306 Goldenrod Ave Boise ID 83713	
Mailing address for fut	· · · · · · · · · · · · · · · · · · ·	(annual report notices): Ave Boise ID 83713	necessitation in the little in
	1100 GOMBING	ATT BOOK ID OUT I	 -
. Future effective date of	f filing (optional):		
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ignature of organizer(s). (/	•	er, or is	
cting in behalf of a member or	members).	Secretary of State use on	
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	lia Sapronova		
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ignature		MATC Found	
yped Name:		155	OFFINE SERVICE
		§ 94/28	SECRETARY OF 5/2009 CT: 178527 B
		CK: 1172	CT: 178527 B

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