



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2015 JAN -5 AM 9:04

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

TCRollingFilms, LLC

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

310 S. 11th Ave Pocatello, ID 83201

(Street Address)

(Mailing Address, if different than street address)

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

Travis Williams

(Name)

310 S. 11th Ave Pocatello, ID 83201

(Street Address)

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

Name

Address

Travis Williams

310 S. 11th Ave Pocatello, ID 83201

Samantha Williams

310 S. 11th Ave Pocatello, ID 83201

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

310 S. 11th Ave Pocatello, ID 83201

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Travis Williams

Signature

Typed Name: Samantha Williams

Secretary of State use only

IDAHO SECRETARY OF STATE

01/05/2015 05:00

CK:1159 CT:304771 BH:1455550
1@ 100.00 = 100.00 ORGAN LLC #2

W146080



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2015 JAN -5 AM 9:04

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Carmus Productions LLC

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

1020 Northgate Mile, Idaho Falls, ID 83401

(Street Address)

(Mailing Address, if different than street address)

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

Matthew F Cardon

4322 E. 49th S. Ammon, ID 83406

(Name)

(Street Address)

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

Name

Address

Matthew F Cardon

4322 E. 49th S. Ammon, ID 83406

Lisa B Cardon

4322 E. 49th S. Ammon, ID 83406

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

1020 Northgate Mile, Idaho Falls, ID 83401

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Matthew F. Cardon

Signature

Typed Name: Lisa B Cardon

Secretary of State use only

IDAHO SECRETARY OF STATE

01/05/2015 05:00

CK:1144 CT:304772 BH:1455552

10 100.00 = 100.00 ORGAN LLC #2

W146079



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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(Instructions on back of application)

2015 JAN -5 AM 9:04

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Signature of a manager, member or authorized person.

Signature

Typed Name: Matthew F. Cardon

Signature

Typed Name: Lisa B Cardon

Secretary of State use only

IDAHO SECRETARY OF STATE

01/05/2015 05:00

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