

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

1.	The name of	the limited	liability company	is:
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CERTIFICATE OF C	-0/5 Ma.				
(Instructions on back	sk of application)	10: .			
	TATE OF OF OF	/ ₍			
The name of the limited liability cor	The name of the limited liability company is:				
EBK	EBK Creative Concepts, LLC				
2. The complete street and mailing ad 1122 Sparks St. North Twin Falls Idaho (Street Address)	ddresses of the initial designated/principal office:				
(Mailing Address, if different than street address)					
3. The name and complete street add	aress of the registered agent:				
Lillie Elaine Becker-Kamai	1122 Sparks St. North Twin Falls Idaho 83301				
(Name)	(Street Address)				
The name and address of at least of company:	The name and address of at least one member or manager of the limited liability company:				
Name Name	Address				
Lillie Elaine Becker-Kamai	1122 Sparks St. North Twin Falls Idaho 83301				
Virgil Nelse Sisiam	1122 Sparks St. North Twin Falls Idaho 83301				
5. Mailing address for future corresponding Sparks St. North Twin Falls Idaho	•				
6. Future effective date of filing (option	onal):				
Signature of a manager, member or person.					
Signature Sulud Slaine Becker 7 Typed Name: Lillie Elaine Becker-Kamai	Secretary of State use only IDAHO SECRETARY OF STAT 03/14/2016 05:00	_			

CK: 4886 CT: 321713 BH: 1518346 10 100.00 = 100.00 DRGAN LLC #2 16 20.00 = 20.00 EXPEDITE C #3

Typed Name: Virgil Nelse Sisiam

Signature

W163267