

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

2014 SEP -2 PM 3: 49

(mondonono o	in back of application	
The name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO
Rapid Fire Collections, 444		<b>3</b> ,11,12
The complete street and mail     4214 S Constitution Ave, Boise, I		initial designated office:
(Street Address) P.O. Box 6682, Boise, ID 83707		
(Mailing Address, if different than street a 3. The name and complete street	•	istered agent:
Amber Deeg	4214 S Constitution Ave, Boise, ID 83716	
(Name)	(Street Address)	
The name and address of at company:	least one member o	manager of the limited liability
<u>Name</u> Dillon Roberts	Address 4214 S Constitution Ave, Boise, ID 83716	
Amber Deeg	4214 S Constitution Ave, Boise, ID 83716	
7.11.201 200g		
<ol> <li>Mailing address for future cor</li> <li>P.O. Box 6682, Boise, ID 83707</li> </ol>	respondence (annua	al report notices):
6. Future effective date of filing	(optional):	
Signature of a manager, memberson	ber or authorized	
Signatura		Secretary of State use only IDAHO SECRETARY OF STATE
Signature Dillon Roberts		09/03/2014 05:00 CK:CASH CT:248561 BH:14396
Typod Harrie.		10 100.00 = 100.00 ORGAN LLC
Signature		12111110

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Typed Name: \_\_\_\_\_