

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

| 2014 JAH 28 | AM | 8: | 5 |
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1. The name of the limited liability company is:

599 Dry Creek Rd Oldtown, ID 83822

| | | B.A.T Productions LLC | IJ |
|--|--|--|----|
| 2. | The complete street and mailing a | addresses of the initial designated office: | |
| | 599 Dry Creek Rd Oldtown, ID 83822 | • | |
| | (Street Address) 599 Dry Creek Rd Oldtown, ID 83822 | | |
| | (Mailing Address, if different than street address) |) | |
| 3. The name and complete street address of the registered agent: | | | |
| | Brian Taylor | 599 Dry Creek Rd Oldtown, ID 83822 | |
| | (Name) | (Street Address) | _ |
| 4. The name and address of at least one member or mana company: | | one member or manager of the limited liability | |
| | <u>Name</u> | <u>Address</u> | |
| | Brian Taylor | 599 Dry Creek Rd Oldtown, ID 83822 | |

5. Mailing address for future correspondence (annual report notices): 599 Dry Creek Rd Oldtown, ID 83822

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature . / (Typed Name: Brian Taylor

Signature

Typed Name: Amanda Taylor

Amanda Taylor

Secretary of State use only

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