



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

FILED EFFECTIVE

11 MAR -3 PM 4:34

(Instructions on back of application)

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

Probility Business Solutions LLC

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

2721 Cinnamon PI Meridian, ID 83646

(Street Address)

(Mailing Address, if different than street address)

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

Brandon Bartschi

(Name)

2721 Cinnamon PI Meridian, ID 83646

(Street Address)

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

Name

Brandon Bartschi

Address

2721 Cinnamon PI Meridian, ID 83646

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

2721 Cinnamon PI Meridian, ID 83646

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Brandon Bartschi

Secretary of State use only

Signature

Typed Name: _____

IDAHO SECRETARY OF STATE
03/03/2011 05:00
CK: 620713 CT: 172099 BH: 1262621
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