



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 MAR 16 AM 9:14

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Alpha Numeric LLC

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

5153 Owens Ave, Iona, Idaho 83427

(Street Address)

PO Box 327, Iona, Idaho 83427

(Mailing Address, if different than street address)

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

Phillip Anderson

(Name)

5153 Owens Ave, Iona, Idaho 83427

(Street Address)

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

Name

Address

Phillip Anderson

5153 Owens Ave, Iona, Idaho 83427

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

P O Box 327, Iona, Idaho 83427

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name:

Phillip Anderson

Signature

Typed Name:

Secretary of State use only

9:00pm/10:00am/11:00am/12:00pm/1:00pm/2:00pm/3:00pm/4:00pm/5:00pm/6:00pm/7:00pm/8:00pm/9:00pm/10:00pm/11:00pm/12:00am/1:00am/2:00am/3:00am/4:00am/5:00am/6:00am/7:00am/8:00am/9:00am/10:00am/11:00am/12:00pm  
Revised 07/2008

IDAHO SECRETARY OF STATE  
03/16/2009 05:00  
CK: 1729 CT: 235127 BH: 1161373  
1 @ 100.00 = 100.00 ORGAN LLC # 2

W82297