

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY EFFECTIVE

	(Instructions on back of application)		2013 APR -5 PM 2: 05
1.	The name of the limited liability con	npany is:	SECRETARY OF STATE
	Linear Design LLC		STATE OF IDAHO
2.	The complete street and mailing addresses of the initial designated office:		
	417 Village Lane Boise, ID 83702 (Street Address) P.O. Box 6180 Boise ID 83707 (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Brandon Ornelas (Name)	417 Village Lane Bois (Street Address)	se, ID 83702
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u> Brandon Ornelas	<u>Address</u> P.O. Box 6180 Boise, ID 83707	
5.	Mailing address for future correspor P.O. Box 6180 Boise, ID 83707	ndence (annual repo	ort notices):
6.	. Future effective date of filing (optional):		
_	nature of a manager, member or son.	authorized	
r		 .	Secretary of State use only
_	nature / Mullempty		
Тур	ped Name: Brandon Ornelas	<u>-</u>	
Sig	nature		IDAHO SECRETARY OF STATE 04/05/2013 05:00

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10HH0 SECRETARY OF STATE 44/05/2013 05:00 CK: 3608 CT: 261576 BH: 1368179 1 8 108,00 = 100.00 ORGAN LLC # 2

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Typed Name: _____