



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

FILED EFFECTIVE

2013 APR -5 AM 9:20

(Instructions on back of application)

SECRETARY OF STATE
STAFF OF IDAHO

1. The name of the limited liability company is:

MCCRINK CONSULTING, LLC

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

660 E. Sand Wedge Drive, Post Falls, ID 83854

(Street Address)

same as above

(Mailing Address, if different than street address)

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

Sarah Christensen

(Name)

20738 S. Watson Rd., Coeur d'Alene, ID 83814

(Street Address)

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

Name
Kevin McCrink

Address

660 E. Sand Wedge Dr., Post Falls, ID 83854

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

660 E. Sand Wedge Drive, Post Falls, ID 83854

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

Signature of a manager, member or authorized person.

Signature: Kevin McCrink

Typed Name: Kevin McCrink

Secretary of State use only

Signature: _____

Typed Name: _____

W123946