



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

10 JAN 25 AM 8:55

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Ceplexis Limited Liability Company

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

315 6th Avenue South, Nampa ID 83651  
(Street Address)

(Mailing Address, if different than street address)

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

Laura A. Looney  
(Name)

315 6th Ave S. Nampa ID 83651  
(Street Address)

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

Name	Address
<u>Laura A. Looney</u>	<u>315 6th Ave S. Nampa ID 83651</u>
_____	_____
_____	_____
_____	_____

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

Same as #2

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 Laura A. Looney  
Typed Name: Laura A. Looney

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

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Revised: 07/2008

IDAHO SECRETARY OF STATE  
01/25/2010 05:00  
CK: 1065 CT: 244191 BH: 1204834  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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