

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

10 MAR 11 AM 8: 41

1. The name of the limited liability c	The name of the limited liability company is:		SECRETARY OF STATE	
tackEd Security	MC	<u> </u>	TATE OF IDAHO	
2. The complete street and mailing a	addresses of the in	itial design	ated/principal office:	
3022 Bretonwood (Street Address)	Ammon,	ID	83406	
(Malling Address, if different than street address	)			
3. The name and complete street ad	dress of the regist	ered agent		
Lack Humphries	30ZZ Bre (Street Address)	4 <del>0</del> 00000	od Ammen, ID	
The name and address of at least company:	one member or m	anager of	the limited liability	
Shannon Olsen	P.O.BOX 5/4	Addr 103 ld.	<u>Fall 5 ID 8340</u> 5	
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	-	·	-	
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5. Mailing address for future correspond	ondence (annual re	eport notice	es):	
3022 Brottonwood	Ammon I	3 0	3406	
6. Future effective date of filing (option	onal):			
Signature of organizer(s). (An organizer is acting in behalf of a member or members).	s a member, or is			
Signature dex repetvo	OM4.	Sec	retary of State use only	
Typed Name: Jock Humbhria	formstill formsteed org. He PMD Swiesed 07/2008		S Calaba I	
100	утта/сап		W 91431	
Signature Shannon 8750	M GIE		IDAHO SECRETARY OF STATE	
Typed Name: <i>Shannan 01</i>	500 I		03/11/2010 05:0	