

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

10 JAN 28 AM 8: 39

1. The name of the limited liability company	is: SECRETARY OF STATE
Hays Cons	sulting, LLC STATE OF IDAHO
2. The complete street and mailing addresses	s of the initial designated/principal office:
	eet, Boise ID 83702
(Street Address) PO Box 7127.	Boise ID 83707
(Mailing Address, if different than street address)	
3. The name and complete street address of	the registered agent:
Jacob Hays	1753 S Magic Mill PI, Boise ID 83709
(Name) (Street	Address)
The name and address of at least one men company:	mber or manager of the limited liability
<u>Name</u>	<u>Address</u>
Jacob Hays	1753 S Magic Mill PI, Boise ID 83709
4	
5. Mailing address for future correspondence	(appual report notices)
	PI, Boise ID 83709
· · · · · · · · · · · · · · · · · · ·	
6. Future effective date of filing (optional):	
Signature of organizer(s). (An organizer is a membe	r, or is
acting in behalf of a member or members).	Secretary of State use only
Signature	C. PMD
Typed Name: Jacob A. Hays	
	IDAHO SECRETARY OF STATE 01/28/2010 05:00
Signature	CK: 184 CT: 244341 BH: 1285484 1 8 188.00 = 160.00 ORGAN LLC # 2
Typed Name:	IDAHO SECRETARY OF STATE  IDAHO SECRETARY OF STATE  91/28/2010 65:00  CX: 184 CT: 244341 BH: 1205464  1 0 180.00 = 100.00 ORGAN LLC # 2