



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2013 MAY 24 AM 8:50

1. The name of the limited liability company is:

Nostos LLC

SECRETARY OF STATE
STATE OF IDAHO

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

1360 S. Boulevard - Idaho Falls, ID 83402

(Street Address)

(Mailing Address, if different than street address)

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

Jacob Lofgreen

(Name)

1360 S. Boulevard - Idaho Falls, ID 83402

(Street Address)

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

Name

Address

Jacob Lofgreen

1360 S. Boulevard - Idaho Falls, ID 83402

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

1360 S. Boulevard - Idaho Falls, ID 83402

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Jacob Lofgreen

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
05/24/2013 05:00
CK: CASH CT: 203512 BH: 1375270
1 @ 100.00 = 100.00 ORGAN LLC # 2

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