



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 APR -7 AM 9:05

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

With an H Productions, LLC

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

359 White Cloud Drive, Boise, ID 83709

(Street Address)

(same)

(Mailing Address, if different than street address)

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

Sarah Shamblin Foster

(Name)

359 White Cloud Drive, Boise, ID 83709

(Street Address)

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

Name

Address

Sarah Shamblin Foster

359 White Cloud Drive, Boise, ID 83709

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

359 White Cloud Drive, Boise, ID 83709

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Sarah Shamblin Foster

208-724-3132

Signature

Typed Name: Sarah Shamblin Foster

Secretary of State use only

IDAHO SECRETARY OF STATE
04/07/2014 05:00
CK: 1053 CT: 295275 BH: 1410002
1 @ 100.00 = 100.00 ORGAN LLC # 2

W136404