

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

10 DEC -7 AM 9: 59

OHA

(Instructions on back of application)

1. The name of the limited liabilit	ty company is: STATE OF
C	OTA Management Group, LLC.
2. The complete street and mailin 1650 South Albright Lane, Boise, lo	ng addresses of the initial designated/principal office:
(Street Address)	
(Mailing Address, if different than street add	iress)
3. The name and complete street	t address of the registered agent:
Trevor William Adams, Jr.	703 N. Olivine Place, Kuna Idaho 83634
(Name)	(Street Address)
company:	east one member or manager of the limited liability
<u>Name</u> Trevor William Adams, Jr.	<u>Address</u> 703 N. Olivine Place, Kuna Idaho 83634
Trevor vimani rodine, or.	700 N. OWNING FIGURE, TOTAL TOTAL OCCUPANT
Mailing address for future corre	espondence (annual report notices):
1650 South Albright Lane, Boise, lo	daho 83709
Future effective date of filing (c	optional):
ignature of a manager, membe	er or authorized
erson.	Secretary of State use only
	Occidenty of Carlo dec Only
ignature Application Adams	The Control of the Co
yped Name: Trevor William Adams,	JI.
Signature	
yped Name:	IDAHO SECRETARY OF STATE
	12/07/2010 05:00

cerl_org_lic Rev. 07/2010

IDAHO SECRETARY UF STATE

12/07/2010 05:00

CK: CASH CT: 133073 BH: 1249799

1 0 100.00 = 100.00 ORGAN LLC # 2

1 0 20.00 = 20.00 EXPEDITE C # 3