

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 AUG 11 AM 8: 30

FILED EFFECTIVE

(Instructions on back of application)

Copperhead Communications LLC 2. The complete street and mailing addresses of the initial designated/principal office: 3031 Highpoint Dr. Idaho Falls, ID 83401 (Street Address) (Mailing Address, If different than street address) 3. The name and complete street address of the registered agent: Christopher Johnson (Name) 3031 Highpoint Dr. Idaho Falls, ID 83401 (Street Address) 4. The name and address of at least one member or manager of the limited liability company: Name Address Christopher Johnson 3031 Highpoint Dr. Idaho Falls, ID 83401 5. Mailing address for future correspondence (annual report notices): 3031 Highpoint Dr. Idaho Falls, ID 83401 6. Future effective date of filing (optional): Signature Signature Christopher Address Signature Signature Christopher Address Signature Signature Christopher Address Signature Signature Signature Christopher Address Signature	•	SEUNE PART OF STATE
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3031 Highpoint Dr. Idaho Falls, ID 83401 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Signature Typed Name: Christopher Johnson IDAHO SECRETARY OF STATE 28/11/2010 05:06 CK: 9794 CT: 250315 BH: 12342	<u>Name</u>	
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Signature of a manager, member or authorized person. Secretary of State use only Signature Typed Name: Christopher Johnson IDAHO SECRETARY OF STATE OB/11/2019 05:06 CK: 9794 CT: 250315 BH: 123432		
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