



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 NOV 26 AM 8:39

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Full Sail LLC

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

812 W. White Sands Dr. Meridian, ID 83646

(Street Address)

(Mailing Address, if different than street address)

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

Steven Satterlee

(Name)

812 W. White Sands Dr. Meridian, ID 83646

(Street Address)

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

Name

Address

Steven Satterlee

812 W. White Sands Dr. Meridian, ID 83646

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

812 W. White Sands Dr. Meridian, ID 83646

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: STEVEN SATTERLEE

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
11/26/2013 05:00
CK: 3136 CT: 290079 DH: 1399566
1 @ 100.00 = 100.00 ORGAN LLC # 2

W131509