



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JUN -2 PM 3:08

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Bialik Wholesale TRADE LLC

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

776 E. Riverside DR. ST 200 Eagle, Id 83616

(Street Address)

(Mailing Address, if different than street address)

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

Michael L. Bialik

(Name)

776 E. Riverside DR ST 200 Eagle Id

(Street Address)

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

Name

Address

Michael L. Bialik

776 E. Riverside DR ST. 200
Eagle, Id, 83616

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

SAME

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature _____

Typed Name: _____

Signature Bialik, Michael

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
06/02/2010 05:00
CK: CASH CT: 248568 BH: 1224989
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