

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	CERTIFICATE OF O	la l		
	(Instructions on back	of application)	20	
1. TI	1. The name of the limited liability company is:			
	·	Adventure IQ LLC	3	
2	2470 W Whitestone Drive			
	Street Address) Meridian, Idaho 83646	·		
• (	(Mailing Address, if different than street address)			
3. TI	The name and complete street address of the registered agent:			
F	Rob Anderson	2470 W Whitestone Drive Meridian, Id 83646		
. (	Name)	(Street Address)		
cc	ne name and address of at least on ompany:  Name Rob Anderson	ne member or manager of the limited liability  Address  2470 W Whitestone Drive Meridian Id 83646		
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5. Mailing address for future correspondence (annual report notices); 2470 W Whitestone Drive Meridian Id 83646				
6. Future effective date of filing (optional):				
Signature of a manager, member or authorized person.				
Signat	ure	Secretary of State use only	<b></b>	
	Typed Name: KOB ANDEKSONI  IDAHO SECRETARY OF STATE  67/36/2612 65:266  Signature CK: 7684 CT: 272838 BH: 1333913			
Typed Name: 1 9 100.00 = 100.00 0RGAH LLC # 2				

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