



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 APR 12 AM 9:11

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

IN THE DARK PRODUCTIONS LLC

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

5676 E SAGEWOOD, IDAHO FALLS, ID 83406

(Street Address)

(Mailing Address, if different than street address)

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

JAMES BILLMAN

(Name)

5676 E SAGEWOOD, IDAHO FALLS, ID 83406

(Street Address)

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

Name

Address

JAMES BILLMAN

5676 E SAGEWOOD, IDAHO FALLS, ID 83401

NICOLE PACKER

4366 BIRCHWOOD CIR, IDAHO FALLS, ID 83406

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

5676 E SAGEWOOD, IDAHO FALLS, ID 83406

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

Signature of a manager, member or authorized person.

Signature

Typed Name:

James Billman

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
04/12/2013 05:00
CK: 152 CT: 281868 BH: 1369245
1 @ 100.00 = 100.00 ORGAN LLC # 2

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