

ROSS MILLER Secretary of State 204 North Carson Street, Suite 4 Carson City, Nevada 89701-4520 (775) 684-5708 Website: www.nvsos.gov

Articles of Organization Limited-Liability Company (PURSUANT TO NRS CHAPTER 86)

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Limited- Liability Company: (must contain approved limited-liability company wording; see instructions)		Check box if a Check box if a Series Limited- Liability Company Liability Company	
2. Registered Agent for Service of Process: (check only one box)	Commercial Registered Agent: Name Noncommercial Registered Agent (name and address below) Office or Position with Entity (name and address below)		
	Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity		
	Street Address City	Nevada Zip Code	
	Mailing Address (if different from street address) City	Nevada Zip Code	
3. Dissolution Date: (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):		
4. Management: (required)		OR Member(s)	
5. Name and Address of each Manager or Managing Member: (attach additional page if more than 3)	1) Name Street Address City	Chate Zin Code	
	Street Address City State Zip Code 2) Name		
	Street Address City State Zip Code 3)		
	Name		
	Street Address City	State Zip Code	
6. Effective Date and Time: (optional)	Effective Date:	ective Time:	
7. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer) 8. Certificate of	X		
		er Signature	
	Address City State Zip Code I hereby accept appointment as Registered Agent for the above named Entity.		
Acceptance of Appointment of	X		
Registered Agent:	Authorized Signature of Registered Agent or On Behalf of Regis	stered Agent Entity Date	