

# Certificate of Organization

State of

This is to certify that the following organization has been duly formed and organized under the laws of the State.

**1. Name of Organization**

**2. Principal Office Address**

**3. Registered Agent**

**4. Nature of Business**

**5. Date of Formation**

\_\_\_\_\_  
Signature of Authorized Person

\_\_\_\_\_  
Date

This Certificate of Organization is issued in accordance with the laws and regulations of the State listed above.