

STATE OF NEVADA

BARBARA K. CEGAVSKE
Secretary of State



JEFFERY LANDERFELT
Deputy Secretary
for Commercial Recordings

OFFICE OF THE
SECRETARY OF STATE

Certified Copy

July 21, 2015

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Document Number(s)	Description	Number of Pages
20150328870-96	Articles of Organization	4 Pages/1 Copies



Respectfully,

Handwritten signature of Barbara K. Cegavske in cursive.

BARBARA K. CEGAVSKE
Secretary of State

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Commercial Recording Division
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BARBARA K. CEGAVSKE
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Articles of Organization
Limited-Liability Company
 (PURSUANT TO NRS CHAPTER 86)

Filed in the office of <i>Barbara K. Cegavske</i> Barbara K. Cegavske Secretary of State State of Nevada	Document Number 20150328870-96 Filing Date and Time 07/21/2015 7:49 AM Entity Number E0349392015-6
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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)	ENERGYCITE LTD.				Check box if a Series Limited-Liability Company	Check box if a Restricted Limited-Liability Company
					<input type="checkbox"/>	<input type="checkbox"/>
2. Registered Agent for Service of Process: (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: CORPORATE SERVICES OF NEVADA Name					
	<input type="checkbox"/> Noncommercial Registered Agent (name and address below) OR <input type="checkbox"/> 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)	Company shall be managed by: <input checked="" type="checkbox"/> Manager(s) OR <input type="checkbox"/> Member(s) (check only one box)					
5. Name and Address of each Manager or Managing Member: (attach additional page if more than 3)	1) TOM D TAMARKIN Name					
	C/O 204 WEST SPEAR STREET #3543		CARSON CITY	NV	89703	
	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:		Effective Time:		
	7. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.				
DON HARMER		<input checked="" type="checkbox"/> DON HARMER Organizer Signature <i>[Signature]</i>				
502 NORTH DIVISION STREET		CARSON CITY	NV	89703		
Address		City	State	Zip Code		
8. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity.					
	<input checked="" type="checkbox"/> CORPORATE SERVICES OF NEVADA <i>[Signature]</i>				7/21/2015	
Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity				Date		

This form must be accompanied by appropriate fees.

ARTICLES OF ORGANIZATION

OF

ENERGYCITE, LTD.

A NEVADA LIMITED-LIABILITY COMPANY

KNOW ALL MEN BY THESE PRESENTS:

THE UNDERSIGNED, FOR THE PURPOSE OF FORMING A LIMITED-LIABILITY COMPANY UNDER THE LAWS OF THE STATE OF NEVADA, PURSUANT TO NRS 86:

DO HEREBY CERTIFY THAT:

FIRST: THE NAME OF THE LIMITED-LIABILITY COMPANY IS:

ENERGYCITE LTD.

SECOND: THE PERIOD OF EXISTENCE OF THIS LIMITED LIABILITY COMPANY SHALL BE PERPETUAL, UNLESS THE LIMITED-LIABILITY COMPANY IS DISSOLVED IN ACCORDANCE WITH THE PROVISIONS AS SET FORTH IN THE OPERATING AGREEMENT.

THIRD: THE ADDRESS OF THE REGISTERED OFFICE OF THE COMPANY IS 204 WEST SPEAR STREET, CARSON CITY, NEVADA 89703. THE COMMERCIAL REGISTERED AGENT OF THE COMPANY IS TO BE *CORPORATE SERVICES OF NEVADA*, LOCATED AT 502 NORTH DIVISION STREET, CARSON CITY, NEVADA 89703.

FOURTH: UPON THE DEATH, INSANITY, RETIREMENT, RESIGNATION, EXPULSION, BANKRUPTCY OR DISSOLUTION OF A MEMBER OR OCCURRENCE OF ANY OTHER EVENT WHICH TERMINATES A MEMBERS CONTINUED MEMBERSHIP IN THE LIMITED-LIABILITY COMPANY, THE BUSINESS OF THE LIMITED-LIABILITY COMPANY MAY BE CONTINUED AT THE INTERMEDIACY OF THE REMAINING MEMBERS BY A MAJORITY VOTE OF ALL REMAINING MEMBERS WITHIN NINETY DAYS OF THE HAPPENING OF THAT EVENT, OR AS SET FORTH IN THE OPERATING AGREEMENT.

FIFTH: ADDITION OF, TRANSFER OF, ASSIGNMENT OF AND/OR PLEDGE OF ANY MEMBERSHIP INTEREST IN THE LIMITED-LIABILITY COMPANY IS SUBJECT TO RESTRICTIONS, IN ACCORDANCE WITH THE PROVISIONS AS SET FORTH IN THE OPERATING AGREEMENT.

SIXTH: MANAGERS SHALL MANAGE THE LIMITED-LIABILITY COMPANY AND THEIR NUMBER SHALL BE NOT LESS THAN ONE (1). THE NUMBER OF MANAGERS OF THE LIMITED-LIABILITY COMPANY MAY BE FIXED FROM TIME TO TIME IN ACCORDANCE WITH THE OPERATING AGREEMENT OF THE LIMITED-LIABILITY COMPANY. THE INITIAL MANAGERS ARE TO SERVE UNTIL THE FIRST ANNUAL MEETING OF MEMBERS OR UNTIL THEIR SUCCESSOR IS ELECTED AND SHALL QUALIFY. THE NAME AND ADDRESS OF THE INITIAL MANAGER(S) IS:

TOM D. TAMARKIN
C/O 204 WEST SPEAR STREET #3543
CARSON CITY, NV. 89703


SEVENTH: NO MANAGER OF THE LIMITED-LIABILITY COMPANY SHALL HAVE PERSONAL LIABILITY FOR DAMAGES FOR BREACH OF ANY FIDUCIARY DUTY AS A MANAGER OF THE LIMITED-LIABILITY COMPANY BY ITS MEMBERS OR ANY OTHER PERSON EXCEPT FOR: ACTS OR OMISSIONS WHICH INVOLVE INTENTIONAL MISCONDUCT, FRAUD OR A KNOWING VIOLATION OF LAW.

EIGHTH: THE LIMITED-LIABILITY COMPANY IS AUTHORIZED TO CARRY ON ANY
LAWFUL BUSINESS OR ENTERPRISE FOR WHICH LIMITED LIABILITY COMPANIES MAY BE ORGANIZED
UNDER THE LAWS OF THE STATE OF NEVADA. THE LIMITED-LIABILITY COMPANY SHALL HAVE THE
SAME POWERS AS AN INDIVIDUAL TO DO ALL THINGS NECESSARY OR CONVENIENT TO CARRY OUT ITS
BUSINESS AND AFFAIRS, SUBJECT TO ANY LIMITATIONS OR RESTRICTIONS IMPOSED BY APPLICABLE
LAW OR THESE ARTICLES. THE LIMITED-LIABILITY COMPANY MAY CONDUCT ALL OR ANY PART OF ITS
BUSINESS, AND MAY HOLD, PURCHASE, MORTGAGE, LEASE AND CONVEY REAL AND/OR PERSONAL
PROPERTY, ANYWHERE IN THE WORLD.

NINETH: THE NAME AND ADDRESS OF THE ORGANIZER IS AS FOLLOWS:

DON HARMER
502 NORTH DIVISION STREET
CARSON CITY, NV. 89703

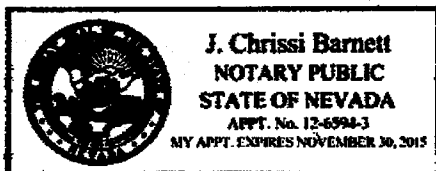
THE UNDERSIGNED, FOR THE PURPOSE OF FORMING A LIMITED-LIABILITY COMPANY
UNDER THE LAWS OF THE STATE OF NEVADA, DO MAKE, FILE AND RECORD THIS CERTIFICATE, AND
CERTIFY THAT THE FACTS HEREIN STATED ARE TRUE AND I HAVE ACCORDINGLY HEREUNTO SET MY
HAND AND SEAL THIS DAY, MONDAY, JULY 20, 2015.



DON HARMER

STATE OF NEVADA }
 : SS.
CARSON CITY }

ON THIS 20TH DAY OF JULY, 2015 PERSONALLY APPEARED BEFORE ME, J. CHRISSI BARNETT,
A NOTARY PUBLIC, DON HARMER WHO ACKNOWLEDGED THAT HE EXECUTED THE ABOVE INSTRUMENT.





NOTARY PUBLIC