

**STATE OF IOWA**  
**[NAME OF LIMITED LIABILITY COMPANY], LLC**  
**CERTIFICATE OF ORGANIZATION**

**First:** The name of the limited liability company is [Name of Company], LLC.

**Second:** The address of its registered office in the State of Iowa is [Address].

**Third:** The name of its registered agent at such address is [Name of Agent].

**In Witness Whereof**, the undersigned has executed this Certificate of Organization this [date] day of [month], [year].

By: \_\_\_\_\_  
Authorized Person

Name: \_\_\_\_\_  
Type or Print