

# Delaware

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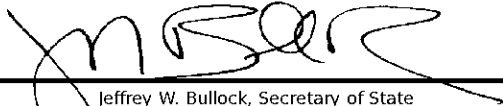
*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "PRIMAL ENDEAVORS, LLC", FILED IN THIS OFFICE ON THE FOURTEENTH DAY OF SEPTEMBER, A.D. 2011, AT 10:43 O'CLOCK A.M.

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Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 9029390

DATE: 09-15-11

STATE of DELAWARE  
LIMITED LIABILITY COMPANY  
CERTIFICATE of FORMATION

First: The name of the limited liability company is

Primal Endeavors, LLC

Second: The address of its registered office in the State of Delaware is

1675 South State St., Ste B in the City of Dover

Zip code 19901. The name of its Registered agent at such address is

Capitol Services, Inc.

Third: (Use this paragraph only if the company is to have a specific effective date of dissolution: "The latest date on which the limited liability company is to dissolve is \_\_\_\_\_.")

Fourth: (Insert any other matters the members determine to include herein.)

In Witness Whereof, the undersigned have executed this Certificate of Formation this

14<sup>th</sup> day of September, 2011.

By: 

Authorized Person (s)

Name: J. Casner Wheelak