

Typed Name:

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JUN 24 AN II: 56

. The name of the limited liability compa	SEUNCHER OF STATE any is: STATE OF SDAHO
D#	ANDEB, LLC
	sses of the initial designated/principal office: DRIVE, BOISE, IDAHO 83709
(Street Address)	, BOISE, IDAHO 83719-0360
(Mailing Address, if different than street address)	
The name and complete street address	s of the registered agent:
DEBRA ELSER	2380 MIDDLEBURG DR., BOISE, IDAHO 83709
(Name)	Street Address)
Name DEBRA A. ELSER	2380 MIDDLEBURG DRIVE, BOISE, ID 83709
company:	member or manager of the limited liability Address
DAN ELSER	2380 MIDDLEBURG DRIVE, BOISE, ID 83709
DAN ELGER	2300 MIDDEEDONG DINGE, DOISE, ID CO.
No. 11 and describe for fathers appropriate	ance (annual report notices):
Mailing address for future corresponde), BOISE, IDAHO 83719-0360
. Future effective date of filing (optional)	: N/A
gnature of organizer(s). (An organizer is a me	ember, or is
ting in behalf of a member or members).	Secretary of State use only
	C.PMID
gnature DEBRA ELSER	IDAHO SECRETARY OF STATE
/ped Name: DEBRA ELSER	mayred 08
gnature // &	IDAHO SECRETARY OF STATE 96/24/2009 05: 9

CK: 5895 CT: 155286 BM: 11/6198 1 # 188.88 = 188.88 ORGAN LLC # 2

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