



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 AUG 29 AM 8: 31

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Konrad Inspection and Consulting LLC

2. The complete street and mailing addresses of the initial designated office:

5 Konrad Road, Salmon ID 83467

(Street Address)

PO Box 1052, Salmon ID 83467

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Kenneth D Konrad

(Name)

5 Konrad Road, Salmon ID 83467

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Kenneth D Konrad

PO Box 1052, Salmon ID 83467

5. Mailing address for future correspondence (annual report notices):

PO Box 1052, Salmon ID 83467

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Kenneth D. Konrad

Typed Name: Kenneth D Konrad

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/29/2013 05:00
CK: 1164 CT: 286957 BH: 1387995
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W128614