

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplicate. FILED EFFECTIVE 2015 AUG 31 PM 2: 14

STATE OF IDAHO

(Remember to include t	he words "Limited Liability Company," "Limited Company," or the abbraviations L.L.C., LLC, or LC)
The complete street and	mailing addresses of the principal office is:
580 Jensen Grove Dr., I	
Sireel Address)	
P O Box 339. Blackfoot,	ID 83221
Mailing Address, if different)	
The name and complete	street address of the registered agent:
Title Financial Specialty	Services Inc 580 Jensen Grave Dr., Blackfoot, ID 83221
Name)	(Address)
The name and address o	of at least one governor of the limited liability company:
Shauna Romrell, Presid	ent P O Box 339, Blackfoot, ID 83221
Name)	(Address)
Name)	(zeenpbA)
,	(madiose)
Name)	(Address)
Name)	(Address)
Mailing address for futur	e correspondence (annual report notices):
P O Box 339, Blackfoot,	ID 83221
(Address)	

Printed Name:

Signature:

Rev 08/2015

IDAHO SECRETARY OF STATE 08/31/2015 05:00

CK:3166668 CT:172099 BH:1490343 10 100.00 = 100.00 ORGAN LLC #2 10 20.00 = 20.00 EXPEDITE C # 3

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