

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

LIMITED LIABILITY	JKGANIZA TY COMPA	NY FILED SESSOTIVE
(Instructions on back	c of application)ን	CIB AM D.
The name of the limited liability cor	npany is:	OF STATE OF IDAHO
	le Holding Compan	BIRC OF IDI
2. The complete street and mailing ad 372 S. Eagle Road, Suite 102, Eagle, ID	dresses of the i	
(Street Address) 372 S. Eagle Road, Suite 102, Eagle, ID (Mailing Address, if different than street address)		
3. The name and complete street add	ress of the regis	tered agent:
Murphy Law Office, P.L.L.C.	847 E. Fairview	Ave., Meridian, ID 83642
(Name)	(Street Address)	
The name and address of at least of company:	one member or i	manager of the limited liability
<u>Name</u>		Address
Christi Anderson	372 S. Eagle Ro	pad, Suite 102, Eagle, ID 83616
5. Mailing address for future correspondence	ndence (annual	report notices):
372 S. Eagle Road, Suite 102, Eagle, ID		,
6. Future effective date of filing (option	nal):	
Signature of a manager, member of person.	r authorized	
porson.		Secretary of State use only
Signature		
Typed Name: Christi Anderson, Member		
		IDAHO SECRETARY OF STATE
Signature		CK: 8356 CT: 193893 BH: 1251139 1 0 100.00 = 100.00 ORSAN LLC # 2
Typed Name:		• • •

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