



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 MAY 28 PM 4: 25

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Try PI, LLC

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

2817 S White Castle Ave, Eagle, ID 83616

(Street Address)

(Mailing Address, if different than street address)

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

Jared Biethman

(Name)

2817 S White Castle Ave, Eagle, ID 83616

(Street Address)

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

Name

Address

Jared Biethman

2817 S White Castle Ave, Eagle, ID 83616

Sherri Biethman

2817 S White Castle Ave, Eagle, ID 83616

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

2817 S White Castle Ave, Eagle, ID 83616

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Jared Biethman

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

05/29/2014 05:00

CK:1926716 CT:172099 BH:1426650

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