



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

NOV 16 AM 8:44

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

JBCSM LLC

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

1356 W Arimo Rd Arimo Id 83214

(Street Address)

(Mailing Address, if different than street address)

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

Becky M Johnson

(Name)

1356 W Arimo Rd Arimo Id 83214

(Street Address)

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

**Name**

**Address**

Becky M Johnson

1356 W Arimo Rd Arimo Id 83214

Jeffrey J Johnson

1356 W Arimo Rd Arimo Id 83214

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

1356 W Arimo Rd Arimo Id 83214

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

*Becky M Johnson*

Typed Name: Becky M Johnson

Signature

*Jeffrey J Johnson*

Typed Name: Jeffrey J Johnson

Secretary of State use only

IDAHO SECRETARY OF STATE  
11/16/2011 05:00  
CK: 700 CT: 264100 BH: 1290221  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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