

CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

10 JAN 25 PM 4: 55

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

1. The name of the limited liability compa	any is:
Escrow Funds Holding Co , Llc	
2. The complete street and mailing addre	esses of the initial designated/principal office:
	enue North, Nampa, ID 83667
(Street Address) PO Box 25, Nampa, ID 83653	
(Mailing Address, if different than street address)	
3. The name and complete street addres	s of the registered agent:
Mark Allen	819 4th Avenue North, Nampa, ID 63667
(Name)	(Street Address)
company: Name	member or manager of the limited liability Address Abor 25 Nouya 35 83653
5. Mailing address for future corresponde	ence (annual report notices): 25, Nampa, ID 83653
6. Future effective date of filing (optional)	
Signature of organizer(s). (An organizer is a me acting in behalf of a member or members)	
Signature ////////////////////////////////////	Secretary of State use only IDAHO SECRETARY OF STATE O1/26/2010 05:08 CK: 3893 CT: 244258 BH: 128586 I 8188.90 = 1868.86 ORBAN LLC:
Typed Name: Mark R Allen	
	vmeske 008
Signature	Secretary of State 1/26/2010 05:00
Typed Name:	E CK: 3893 CT: 244258 DH: 128586;

W90059