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## CERTIFICATE OF ORGANIZATION VAALAN SECRETARY DE STATE

	(Instructions on back	OTHE U. TURIN	
حتيك			
1. The r	name of the limited liability co	mpany is:	
	·	asonry Concepts LLC	
2. The c	complete street and mailing ad	Idresses of the initial designated/principal office	
-		dition Dr. Meridian, Idaho 83646	
	t Address)		
•	ng Address, if different than street eddress)		
3. The r	name and complete street add	ress of the registered agent:	
	C T Corporation System	1111 W. Jefferson, Ste. 530 Boise, Idaho 83702	
(Name	)	(Street Address)	
4. The n		one member or manager of the limited liability	
·	Name	Address	
**********	Kevin Sommer	1725 E. Expedition Drive, Meridian, ID 83646	
	g address for future correspor	ndence (annual report notices):	
	· .	dition Drive, Meridian, ID 83646	
	e effective date of filing (option of organizer is a		
-	nalf of a member or members).	,	
cting in bei	iali of a member of members.		
	V I I I I I I I I I I I I I I I I I I I	Secretary of State use only	
ignature	V Sens		
	V Sens	We will be seen to be	
ignature	Me: Kevin Sommer		

IDAHO SECRETARY OF STATE 95/95/2009 95:00 CK: 36822 CT: 2618 BH: 1169155 1 0 100.00 = 100.00 ORSAN LLC # 2