



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED

09 MAR 12 AM 8:19

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

DROWN CONSTRUCTION LLC.

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

1943 SHOUP AVE E. TWIN FALLS, IDAHO 83301

(Street Address)

(Mailing Address, if different than street address)

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

KEITH DROWN

(Name)

1943 SHOUP AVE E. TWIN FALLS, IDAHO 83301

(Street Address)

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

Name

Address

KEITH DROWN

1943 SHOUP AVE E. TWIN FALLS, IDAHO 83301

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

1943 SHOUP AVE E. TWIN FALLS, IDAHO 83301

6. Future effective date of filing (optional):

4-1-09

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Keith Drown

Typed Name: KEITH DROWN

Signature _____

Typed Name: _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
03/12/2009 05:00
CK: 5450 CT: 235007 DN: 1160090
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