## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

FILED EFFECTIVE

W192390

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2017 NOV 24 AM 9: 12

Complete and submit the application in duplicate.

SECRETARY OF STATE

The manner of the Complete of the	TO TEACH OF THE STATE OF THE ST	STATE OF IDAHO"
The name of the limited lia		
Twisted Steel Fabrication	<u> </u>	
(Remember to include the	e words "Limited Liability Company," "Limite	d Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and r	nailing addresses of the principal	office is:
484 North 3479 East, Lev	risville, ID 83431	
(Street Address)		
PO Box 268, Lewisville, II	) 83431	
The name of the registere	d agent and the street address o	f the registered agent:
Michael Lynn	84 North 3479 East, Lewisville, ID 83431	
(Name)	(Address cannot be a post office box or postal mail box.)	
The name and address of	at least one governor of the limit	ed fiability company:
Michael Lynn	84 North 3479 East, Lewisville, ID 83431	
(Name)	(Address)	
(Name)	(Address)	
	(, assess)	
(Name)		
(Nanc)	(Address)	
(Name)	(Address)	
K.C.N. A.S. C. C.		
~	correspondence (annual report r	iotices):
PO Box 268, Lewisville, II	) 83431	
(Address)		
nature of organizer(s).		
M		Secretary of State use only
nature:		IDAHO SECRETARY OF STATE
ted Name: Michael Lynn		11/24/2017 05:00
led Name:		CX:1050 CT:348825 BH:1613375

Rev. 11/2015

Printed Name: ---

Signature: