

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 APR -3 AM 10: 45

SECRETARY OF STATE STATE OF IDAHO

. The name of the limited liability	y company is:
	Deviate, LLC
. The complete street and mailing	g addresses of the initial designated/principal office:
681	18 Kirkwood Ct., Boise, ID 83709
(Street Address)	
(Mailing Address, if different than street addr	ress)
. The name and complete street	address of the registered agent:
Lisa Smith	6818 Kirkwood Ct., Boise, ID 83709
(Name)	(Street Address)
The name and address of at leacompany:	ast one member or manager of the limited liability
Name	Address
Lisa Smith	6818 Kirkwood Ct., Boise, ID 83709
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	espondence (annual report notices): 18 Kirkwood Ct., Boise, ID 83709
	To Allikwood Ct., Boise, ID 65769
Future effective date of filing (o	ptional):
. Tatare encouve date of filling to	prioritity.
gnature of organizer(s). (An organiz	ver is a member or is
ting in behalf of a member or members)).
11 15	Secretary of State use only
gnature Molecutar for	
/ped Name: Robert F. Tho	<u>ဘmas</u> ၂၅
	Omas Date Control C
gnature	CX: 115752 CT: 1177 BH: 116
/ped Name:	

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