

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

2012 DEC 19 PM 3: 37

SECRETARY OF STATE

	(Instructions on b	ack of application)	STATE OF IDAHO
1. Th	e name of the limited liability	company is:	
F	HG, LLC	·	
	The complete street and mailing addresses of the initial designated office: 1116 South Vista Ave, Suite 204, boise ID 83705		
	Street Address)		
<u>(N</u>	Mailing Address, if different than street address	88)	
3. Th	The name and complete street address of the registered agent:		
_	ndrew Shoppe	<u> </u>	uite 1100, Boise ID 83702
(1	Name)	(Street Address)	
	The name and address of at least one member or manager of the limited liability company:		
•	<u>Name</u>		Address
- S	usan Alveshere	1116 S. Vista Ave., Sui	tte 204, Boise ID 83705
_			
r 14.	allia a addus a fact (		
	ailing address for future corres	•	t notices):
	116 S. Vista Ave., Suite 204, Boise	ID 83705	
6. Fu	ture effective date of filing (op	tional):	
Signat	rure of a manager, member	or authorized	
	Clo		Secretary of State use only
Signati			
Typed	Name: Susan Alv.	eshere	
			IDAHO SECRETARY OF STATE 12/20/2012 05:00
	ure		CK: CASH CT: 277394 BH: 1352167
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