



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 DEC 18 AM 8:36

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

MCMM UTAH, LLC

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

5145 HEYREND DRIVE, IDAHO FALLS, ID 83402

(Street Address)

PO BOX 1604, IDAHO FALLS, ID 83403

(Mailing Address, if different than street address)

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

MATT MORGAN

(Name)

5145 HEYREND DRIVE, IDAHO FALLS, ID 83402

(Street Address)

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

Name

Address

MATT MORGAN

PO BOX 1604, IDAHO FALLS, ID 83403

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

PO BOX 1604, IDAHO FALLS, ID 83402

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: MATT MORGAN

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/18/2014 05:00

CR:49211 CT:127936 BH:1453521

10 100.00 = 100.00 ORGAN LLC #2

10 20.00 = 20.00 EXPEDITE C #3

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