







STATE OF IDAHO

Office of the secretary of state, Lawerence Denney CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Idaho Secretary of State PO Box 83720 Boise, ID 83720-0080 (208) 334-2301 Filing Fee: \$100.00 For Office Use Only

-FILED-

File #: 0004007130

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| Certificate of Organization Limited Liability Com Select one: Standard, Expedited or descriptions below) | • | Expedited (+\$40; filing fee \$140 | 0) |
|--|------------------------------------|---|------------|
| 1. Limited Liability Company Name | | | |
| Type of Limited Liability Company | | Limited Liability Company | |
| Entity name | | ProSafety LLC | |
| 2. The complete street address of the principal | office is: | | |
| Principal Office Address | | 5205 W RIVER SPRINGS STR EAGLE, ID 83616 | EET |
| 3. The mailing address of the principal office is: | | | |
| Mailing Address | | 5205 W RIVER SPRINGS ST EAGLE, ID 83616-6275 | |
| 4. Registered Agent Name and Address | | | |
| Registered Agent | | LEGALCORP SOLUTIONS LLC | C |
| | | Commercial Registered Agent | |
| | | Physical Address 800 W MAIN ST STE 1460 | |
| | | BOISE, ID 83702 | |
| | | Mailing Address | |
| | | 800 W MAIN ST STE 1460 | |
| | | TRAVIS CRABTREE BOISE, ID 83702 | |
| I affirm that the registered agent | appointed has consented t | o serve as registered agent for this | entity. |
| Name | | Address | |
| Charlene E Jones | 5205 W RIVER SP EAGLE, ID 83616 | 5205 W RIVER SPRINGS STREET EAGLE, ID 83616 | |
| Signature of Organizer: | | | |
| | | | |
| Charlene E Jones | | | 09/18/2020 |