

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY 2014 MAR 26 PM 12: 46

OFF A	(Instructions on back of application)  SECRETARY OF STATE STATE OF IDAHO
1.	The name of the limited liability company is:
2	The complete street and mailing addresses of the initial designated effect.
۷.	The complete street and mailing addresses of the initial designated office:  2914 Manchester Dr. Caldwell, Id. 85605  (Street Address)
	(Mailing Address, if different than street address)
3.	The name and complete street address of the registered agent:
	Roxald Maden 2914 Manchester by Caldwell ID83605 (Street Address)
4.	The name and address of at least one member or manager of the limited liability company:
	Name Address
	Ronald Maden 2914 Manchester Dr. Caldwell, Id. 83605  Joseph Maden 2914 Manchester Dr. Caldwell, Id. 83605  Jason Maden 2914 Manchester Dr. Caldwell, Id. 83605
	Joseph Maden 2914 Manchester Dr. Caldwell, td. 83603
	Jason Maden 2914 Manchester Dr. Caldwell, Id. 83605
5.	Mailing address for future correspondence (annual report notices):
	2914 Manchester Dr. Caldwell, Id. 83605
6.	Future effective date of filing (optional):
_	nature of a manager, member or authorized
•	Secretary of State use only
	nature Kongh Mal
Тур	ed Name:
Sign	nature IDAHO SECRETARY OF STATE  93/26/2014 05:00
	ed Name: CK: CASH CT: 294871 BH: 1417209

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