

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2016 SEP 19 AM 10: 05

1.	The name of the limited liability company CARLSON CAPITAL, LLC	is:	SECRETARY OF STATE STATE OF IDAHO	
2.	The complete street and mailing addressed 473 MORGAN DR REXBURG, ID 83440 (Street Address)	es of the	e initial designated office:	
	(Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	COHEN NOLL CARLSON 473	473 MORGAN DR REXBURG, ID 83440		
	(Name) (Stree	et Address)		
4.	The name and address of at least one member or manager of the limited liability company:			
	Name Address COHEN NOLL CARLSON 473 MORGAN DR REXBURG. ID 83440			
	COHEN NOLL CARLSON 473 MORGAN DR REXBURG, ID 83440			
5.	Mailing address for future correspondence (annual report notices): 473 MORGAN DR REXBURG, ID 83440			
6.	Future effective date of filing (optional):			
_	nature of a manager, member or authorson.	orized		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Secretary of State use only	
Signature			IDAHO SECRETARY OF STATE 09/19/2016 05:00	
Typed Name: COHEN NOLL CARLSON			CK:206828523935 CT:329192 BH:1546 16 100.00 = 100.00 ORGAN LLC #2	

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Typed Name: ____

Signature_____