



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 SEP -8 AM 10: 18

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

SOS SURPLUS LLC

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

768 N. PLEASANT VIEW ROAD, POST FALLS, ID.
(Street Address)

(Mailing Address, if different than street address)

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

Kevin D. Locket
(Name)

768 N. Pleasant View Rd.
(Street Address)

Post Falls, Idaho 83854

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

Name	Address
<u>Maureen E. Locket</u>	<u>14926 Verado Drive, Rancho Murieta, Ca.</u>
<u>Jeffrey K. Locket</u>	<u>6312 Brando Loop, Fair Oaks, Ca. 95828</u>
<u>Kevin D. Locket</u>	<u>761 N. McGuire Rd, Post Falls, Id.</u>
	<u>83854</u>

05183

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

768 N. Pleasant View Rd, Post Falls, Id. 83854

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Maureen Locket

Typed Name: Maureen Locket

Signature _____

Typed Name: _____

Secretary of State use only

IDaho SECRETARY OF STATE

09/09/2014 05:00

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