| AT SED | | |
|--|---------------------------------------|--|
| | | _ |
| LIMITED LIABIL | LIIY COMPANY | 2013 SEP 16 PH 1: 32 |
| (Instructions on ba | (Instructions on back of application) | |
| 1. The name of the limited liability of | company is: | STATE OF IDAHO |
| REVAZA, LLC | | |
| 2. The complete street and mailing 3100 S EASTON AVE, BOISE, ID 837 | | designated office: |
| (Street Address) | | |
| (Mailing Address, if different than street address | s) | |
| 3. The name and complete street a | ddress of the registered | agent: |
| TREVOR KAMPLAIN | 3100 S EASTON AVE, BOISE, ID 83706 | |
| (Name) | (Street Address) | |
| TREVOR M. KAMPLAIN ELIAS A. KAMPLAIN | 3100 S EASTON AVE | |
| 5. Mailing address for future corresp | | t notices): |
| 3100 S EASTON AVE, BOISE, ID 837 | /06 | |
| 6. Future effective date of filing (opt | ional): | |
| Signature of a manager, member person. Signature | or authorized | Secretary of State use only |
| Typed Name: TREVOR M. KAMPLAIN Signature Signature Typed Name: ELIAS A. KAMPLAIN | lam | IDAHO SECRETARY OF STATE 09/16/2013 05:00 CK: CASH CT: 207567 BH: 1396198 1 8 100.00 = 100.00 ORGAN LLC # 1 |
| 2012 | cert_org_lic Rev. 07/2010 | W129260 |