

Signature_ Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

CERTIFICATE C		PANY	O EFFE
(Instructions or	n back of application	n) 1	2.06
The name of the limited liabili	ity company is: Sarrazolla 8130 L	ı	
The complete street and maili 8130 W. Northview Street, Suite 1 (Street Address)	_	e initial designated/principal offi	ice:
(Mailing Address, if different than street ad	ldress)		
The name and complete stree	et address of the req	gistered agent:	
Idaho Service Company	101 S. Capito	l Bivd., 10th Floor, Boise, ID 83702	
	(Street Address)		
	east one member o		<i>(</i>
The name and address of at le	8130 W. Norti	r manager of the limited liability Address hview Street, Suite 100	<i>'</i>
The name and address of at le company:		r manager of the limited liability Address hview Street, Suite 100	/
The name and address of at le company:	8130 W. Norti	r manager of the limited liability Address hview Street, Suite 100	·
The name and address of at le company: Name Alec and Erica Sarrazolla	8130 W. Norti Boise, ID 837	r manager of the limited liability Address hview Street, Suite 100	y
The name and address of at le company: Name Alec and Erica Sarrazolla Mailing address for future correspond to the corresponding address for future corresponding to the correspondi	8130 W. North Boise, ID 837	r manager of the limited liability Address hview Street, Suite 100	
The name and address of at le company: Name Alec and Erica Sarrazolla Mailing address for future core	8130 W. North Boise, ID 837 respondence (annua) 00, Boise, ID 83704 optional):	r manager of the limited liability Address hview Street, Suite 100	

IDAHO SECRETARY OF STATE
11/19/2012 05:00
CK: NONE CT: 1117 BH: 1348162
1 2 100.00 = 100.00 ORGAN LLC # 2

cert_org_lic Rev. 07/2010

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