

Signature: ___

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2016 MAR 11 AM 9: 10

Complete and submit the application in duplicate.

SECRETARY OF STATE

				STATE OF IDAHO	
1.	The name of the limited lia				
	Sunrise Field Services LL		d Carra may a se tha abheartaíone (1.75	330 0003	
	(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)				
2.	The complete street and mailing addresses of the principal office is: 191 Falcon Ridge Ln, Kooskia, ID 83539				
	(Street Address)				
	(Mailing Address, if different)				
3.	The name and complete street address of the registered agent:				
	John Fershee	191 Falcon Rido	191 Falcon Ridge Ln, Kooskia, ID 83539		
	(Name)	(Address)	·		
4.	The name and address of at least one governor of the limited liability company:				
	John Fershee	191 Falcon Ridg	191 Falcon Ridge Ln, Kooskia, ID 83539		
	(Name)	(Address)			
	(Name)	(Address)			
	(Name)	(Address)			
	(Name)	(Address)			
-	Mailing address for future	correctional control control	aut matienale		
5,	Mailing address for future correspondence (annual report notices): 191 Falcon Ridge Ln, Kooskia, ID 83539				
	(Address)				
	nature of organizer(s).		Secretary of State use	a only	
orir	nted Name John Fershee		Secretary of State use	a offiny	
	Wa Kala			TARY OF STATE	
Sig	nature: MV ALL		CK:213 CT:321	016 05:00 627 BH:1518039	
^o rir	nted Name:		16 100.00 = 100	0.00 ORGAN LLC #2	
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