

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2013 MAY 31 AM 9: 01

17 ± 01	(Instructio	ons on back of application	on) ga -
1. The	name of the limited	liability company is:	SECTION STATE OF STATE
Bas	bro LLC		
2. The complete street and mailing addresses of the initial designated office			ne initial designated office:
118	11801 Slauson Ave., Suite A Santa Fe Springs CA 90670		
(Stre	et Address)		
(Mai	(Mailing Address, if different than street address)		
3. The	he name and complete street address of the registered agent:		
Bre	tt Blazicek	391 W State	Street, Suite G Eagle, ID 83616
(Ñar	ne)	(Street Address	s)
	name and address o pany: <u>Name</u>	of at least one member	or manager of the limited liability  Address
Bre	tt Blazicek	391 W State	Street, Eagle, ID 83616
5. Mailing address for future corresponden			ual report notices):
118	01 Slauson Ave., Suite	A Santa Fe Springs CA 906	70
6. Futu	re effective date of f	iling (optional):	
Signatu person.	re of a manager, r	nember or authorized	
0:	- Ball		Secretary of State use only
Signatur	ame: Brett Blacice	<i>B</i>	
i ypeu iv	1		
Signatur	e		IDAHO SECRETARY OF STATE
Typed Name:			05/31/2013 05:00 CK: 4583 CT: 280093 BH: 1376160 1 @ 100.00 = 100.00 ORGAN LLC # 2