



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 SEP 23 AM 8:31

1. The name of the limited liability company is:

JMBS, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

1345 South Breezy Way, Post Falls, ID 83854

(Street Address)

PO Box 96, Coeur d'Alene, ID 83816

(Mailing Address, if different than street address)

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

Bonne H. Giese

(Name)

1345 South Breezy Way, Post Falls, ID 83854

(Street Address)

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

Name

Address

Bonne H. Giese

PO Box 96, Coeur d'Alene, ID 83816

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

PO Box 96, Coeur d'Alene, ID 83816

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Bonne H. Giese

Typed Name: Bonne H. Giese

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
09/23/2011 05:00
CK: 791126 CT: 172099 BH: 1291643
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