



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

FILED EFFECTIVE

2014 DEC 10 AM 10: 16

SECRETARY OF STATE
STATE OF IDAHO

(Instructions on back of application)

1. The name of the limited liability company is:

RHINO LININGS OF TWIN FALLS, LLC

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

2502 Twin View Lane, Twin Falls, ID 83301

(Street Address)

(Mailing Address, if different than street address)

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

Nathan R. Robinson

(Name)

2502 Twin View Lane, Twin Falls, ID 83301

(Street Address)

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

Name
Nathan R. Robinson

Address

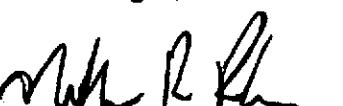
2502 Twin View Lane, Twin Falls, ID 83301

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

2502 Twin View Lane, Twin Falls, ID 83301

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

Signature of a manager, member or authorized person.

Signature 

Typed Name: Nathan R. Robinson

Signature _____

Typed Name: _____

Secretary of State use only

IDABO SECRETARY OF STATE

12/10/2014 05:00

CK:2217 CT:303983 BH:1452412
1@ 100.00 = 100.00 ORGAN LLC #2
1@ 20.00 = 20.00 EXPEDITE C #3

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