

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 NOV 19 AM 8: 28

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| 1. The name of the limited liability company is: SECRETARY OF STATE OF ID- | STATE |
| Dayridge Canine Facility LLC STATE OF IDA | HO |
| 2. The complete street and mailing addresses of the initial designated/principal of 34756 Hwy 41, Oktown, ID 83822 | fice: |
| (Street Address) | |
| (Mailing Address, if different than street address) | |
| 3. The name and complete street address of the registered agent: | |
| Christina Hilbert 34756 Hwy 41, Oldtown, ID 83822 | |
| (Name) (Street Address) | 1 |
| 4. The name and address of at least one member or manager of the limited liabilit company: | y |
| Name Address | |
| Charles Hilbert 34756 Hwy 41, Oldtown, ID 83822 | - - |
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| | 4. |
| 5. Mailing address for future correspondence (annual report notices): | |
| 34756 Hwy 41, Oldtown, ID 83822 | |
| 6. Future effective date of filing (optional): | |
| o. Tutule ellective date of mility (optional). | |
| Signature of organizer(s). (An organizer is a member, or is | |
| acting in behalf of a member or members). | |
| Secretary of State use only | |
| SignatureChristina Hilbert | |
| | , · |
| Signature Signature | APP MAILE IN THE |
| Signature | RY OF STATE |
| g 11/19/20/2 CK: 1945_CT: 2423 | 13 BH: 119596 |

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