

1.

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed
Complete and submit the application in duplicate.

The name of the limited liability company is:

2018 SEP 17 AM 10: 27 SECRETARY OF STATE STATE OF IDAHO

(Nemember to include the words	"Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC)
The complete street and mailing a 211 9th Ave North, Twin Falls,	ddresses of the principal office is: ID 83301
Street Address)	
(Mailing Address, if different)	
The name and complete street ad	dress of the registered agent:
Thomas Benjamin Aiello	211 9th Ave North, Twin Falls, ID 83301
Name)	(Address)
Thomas Benjamin Aiello	one governor of the limited liability company: 211 9th Ave North, Twin Falls, ID 83301
(Name)	(Address)
(Manie)	944 9th Ave North Twin Falls ID 99994
Kim Cheri Wiggins	211 9th Ave North, Twin Falls, ID 83301

(Address)

(Address)

Mailing address for future correspondence (annual report notices):
 211 9th Avenue North, Twin Falls ID 83301

(Address)

Signature of	of organ	iizer(s).	
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Printed Name:

(Name)

(Name)

Thomas B Aiello

Signature:

1BAD

Printed Name:

Kim Cheri Wiggins

Signature:

Rev. 01/2018

: Kim Chier Way

Secretary of State use only

10AHO SECRETARY OF STATE 09/17/2018 05:00

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