

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 MAY 15 PM 4:5

SECRETARY OF STAT

 The name of the 	. The name of the limited liability company is:			
(rusta)	Check LLC			
2. The complete str		dresses of the ini	tial designated office	<u> </u>
7020 N. Roe Avenue, Boise, ID 83713				-
(Street Address)				
(Mailing Address, if diffe	erent than street address)			
3. The name and co	omplete street addi	ress of the registe	red agent:	
Alicia Lizama		7020 N. Roe Aver	iue, Boise, ID 83713	
(Name)	(Name)		(Street Address)	
company:	ddress of at least o	ne member or ma	anager of the limited Address	liability
Alicia Lizama		7020 N. Roe Avenue, Boise, ID 83713		
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V 1000 (1)				
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		•		
Mailing address for		idence (annual re	port notices):	
7020 N. Roe Avenu	ue, Boise, ID 83713			
Future effective d	ate of filing (option	al):		
Signature of a mana	ager, member or	authorized		
person.		(*************************************		The state of the s
Cinner Aliaic	- /		Secretary of State	use only
Signature Alicia Lizama			IDAHO SECF	RETARY OF STATE
Typed Name: Alicia Li	zamok			2015 05:00
				10281 BH:1475715 00.00 ORGAN LLC #2
Signature			re recent - to	oreo oreans man #.
Typed Name:		*	باست و الر	7/17

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