

## CERTIFICATE OF ORGANIZATIONILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

7012 MAR 15 AN ID: 59

	,	SEURLIARY OF STATE
1.	The name of the limited liability con	00 4 01 30 31412
UNITED BROKERS LLC		
2.	. The complete street and mailing addresses of the initial designated office:	
	2489 KIMBERLY ROAD STE M TWIN FALLS,ID 83301	
	(Street Address) PO BOX 1029 TWIN FALLS, ID 83301	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	JEFF BULKLEY	1373 SILVER CREEK WAY TWIN FALL,ID 83301
	(Name)	(Street Address)
4.	The name and address of at least one member or manager of the limited liability company:  Name  Address	
	MIKE AARDEMA	4133 HIDDEN LAKES DRIVE KIMBERLY,ID 83341
	<del></del>	
_		
5.	Mailing address for future correspondence (annual report notices):	
	PO BOX 1029 TWIN FALLS,ID 83301	
6.	6. Future effective date of filing (optional):	
Signature of a mapager, member or authorized		
pen	son,	Secretary of State use only
Sign	nature #	
Typed Name JEFF BULKLEY		
	<b>Y</b> / .,	
Sig	nature Kan musky	
Typed Name: KENT MURPHY IDAHO SECRETARY OF STATE		
		THERE ASSESSED TO THE PARTY OF

cert\_org\_lis Rev. 07/2010

03/15/2012 05:00 CK: 933427 CT: 172899 BH: 1315316 1 0 100.00 = 100.00 ORGAN LLC # 2 1 0 20.00 = 20.00 EXPEDITE C # 3