

(Street Address)

(Mailing Address, if different)

2.

3.

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 complete street and mailing addresses of the principal office is:

The name and complete street address of the registered agent:

2018 AUG -6 AM 9: 40

SECRETARY OF STATE STATE OF IDAHO

1. The name of the limited liability company is: **IWH LLC**

2732 Poleline Rd Pocatello, ID 83201

	Brian Jacobia	541 Skyline Dr. Pocatello, IE		
	(Name)	(Address)		
4.	The name and address of at least one governor of the limited liability com			
	Jami Jacobia	541 Skyline Dr. Pocatello, ID		
	(Name)	(Address)		
	(Neme)	(Address)		
	(Name)	(Address)		
	(Name)	(Address)		
5.	541 Skyline Dr. Pocatello, IE	spondence (annual report notices): 0 83204		
Sigr	nature of organizer(s).			
Prin	ited Name: Brian Jacobia			
Sigr	nature: B	- CK:19		
Prin	ted Name: Jami Jacobia	10 2		
Sigr Rev. 01	nature: Juni Jack	<u></u>		
	-	1		

C		
(Remember to include the	words "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC)	
olete street and mail	ing addresses of the principal office is:	
leline Rd Pocatell		
ess)		
ress, if different)		
and complete stree	et address of the registered agent:	
cobia	541 Skyline Dr. Pocatello, ID 83204	
	(Address)	•
e and address of at l	east one governor of the limited liability company: 541 Skyline Dr. Pocatello, ID 83204	
	(Address)	
	(Address)	
	(Address)	-
	(Address)	
ldress for future con	respondence (annual report notices):	
ine Dr. Pocatello,	ID 83204	
)		•

Secretary of State use only

IDAHO SECRETARY OF STATE 08/06/2018 05:00

CK: 19831714 CT: 172099 BH: 1657215 16 100.00 = 100.00 ORGAN LLC #2 10 20.00 = 20.00 EXPEDITE C #3

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