

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2013 JAN -8 AM 8: 54

(Instructions on back of application)

SECRETA STATE	
ice:	•
a ID 83687	
ed liability	
ID 83687	

1.	The name of the limited liability con	npany is: SECRETARY STATE OF
2.	The complete street and mailing add 5660 E Franklin Road Suite 300, Nampa, (Street Address)	dresses of the initial designated office:  ID 83687
	(Mailing Address, if different than street address)	
3. The name and complete street address of the reg		ess of the registered agent:
	Michael L. Fife (Name)	5660 E Franklin Road Suite 300, Nampa ID 83687 (Street Address)
4.	The name and address of at least or company:	ne member or manager of the limited liability
	<u>Name</u> Gary W. Walker	<u>Address</u> 5660 E Franklin Rd Suite 300, Nampa, ID 83687
5.	Mailing address for future correspon- 5660 E Franklin Rd. Suite 300 Nampa ID	
3.	Future effective date of filing (option	al):
	nature of a manager, member or	authorized O
igr	nature Muchan Hy	Secretary of State use only
	ed Name: Michael L. Fife  ature Wallse	IDAHO SECRETARY OF STATE

cert\_org\_llc Rev. 07/2010

IDAHO SECRETARY OF STATE
01/08/2013 05:00
CK: 4119 CT: 254241 BH: 1354799
1 0 100.00 = 100.00 ORGAN LLC # 2

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Typed Name: Gary W Walker