| | | RGANIZATION | FILED EFFECT |
|---|---------------------------------------|---|---------------------------------------|
| LIMITED LIABILITY COMPANY | | 2014 FEB 10 PM 4:03 | |
| | (Instructions on back of application) | | SECRETARY OF STATE STATE OF IDAHO |
| 1. The name of the | e limited liability comp | any is: | STATE OF IDAHO |
| Norlen Abundan | e System LLC | - | |
| 2. The complete s 6916 N 25th E | treet and mailing addr | esses of the initial desig | nated office: |
| (Street Address) Idaho Falis, Idah | 834 01 | | · · · · · · · · · · · · · · · · · · · |
| | fferent than street address) | | |
| 3. The name and | complete street addres | ss of the registered ager | nt: |
| Amy Kingston | | 477 Shoun Ave Ste 102 - a | |
| (Name) | | 477 Shoup Ave Ste 102 Idaho Falls ID 8340 (Street Address) | |
| The name and a company: Sherilee E. Nork | Name <u>Add</u> | | 1635 |
| Sherilee E. Norle | | <u>Autor</u> 6916 n 25th e Idah o Falls, ID | |
| Trevor D. Beast | ey . | 42 N. 740 W. Blackfoot, ID 83221 | |
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| | | | |
| • | | ence (annual report notic | xes): |
| 6916 n 25th E. 10 | aho Falls, ID 83401 | <u> </u> | |
| 6. Future effective | date of filing (optional) |): | ., |
| | | | |
| | nager, member or a | uthorized | |
| Bignature | ee E. Norlen | si si | ecretary of Stale use only |
| Typed Name: Shen | 2 | — <u> </u> | |
| | iver - Bais | 4 | |
| | | | |
| | r D. Beasley | | THAND OFFICTION OF STATE |
| | | Org. II:: Rev. 07/20 ⁷ 0 | IDAHO SECRETARY OF STATE |

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