

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAR -8 PM 2:29

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Trowell Investments, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

1124 W Hawaii Avenue, Nampa, ID 83686

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Michele Trowell

(Name)

1124 W Hawaii Avenue, Nampa, ID 83686

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Stacy Trowell

1124 W Hawaii Avenue, Nampa, ID 83686

Alexander Trowell

1124 W Hawaii Avenue, Nampa, ID 83686

Michelle Trowell

" " "

5. Mailing address for future correspondence (annual report notices):

1124 W Hawaii Avenue, Nampa, ID 83686

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Michele Trowell

Typed Name: Michele Trowell

Signature _____

Typed Name: _____

Secretary of State use only

W/01/58