

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE

(Instructions on back of application)

SECRETARY OF STATE

The	name of the limited liability co	mpany is:	STATE OF IDAHO
		BoiseFX, LLC	
The	The complete street and mailing addresses of the initial designated/principal office:		
	11300 Ashburton Dr., Boise, ID 83709		
(Stre	et Address)		
(Mai	ling Address, if different than street address)		
. The	name and complete street add	dress of the registered a	gent:
	Lawrence J Smith		on Dr., Boise, ID 83709
(Na	me)	(Street Address)	
	name and address of at least	one member or manage	er of the limited liability
	Name		Address
	Lawrence J Smith	11300 Ashburton Dr., Boise, ID 83709	
	DeLoris J Smith	11300 Ashburton Dr. Boise, ID 83709	
		•	•
. Mail	ling address for future correspo	ondence (annual report	notices):
	11300 A	shburton Dr., Boise, ID 8370	9
. Futu	ure effective date of filing (option	onal):	
ionatu	re of organizer(s). (An organizer is	s a member, or is	
•	behalf of a member or members).		
•		<b>7</b> 0	Secretary of State use only
Signatu	18 January		
Typed N	lame: Lawrence J \$ mil		
		o'serr o'serr	IDAHO SECRETARY OF ST
Signatu	re	Some LC formshert, org. R.: PMD swissed 07/2008	CK: 1836 CT: 229889 BH:
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