



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2015 AUG -3 AM 8:58

(Instructions on back of application)

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

AJAX2, LLC

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

201 S Hemlock Ct., Post Falls, ID 83854

(Street Address)

(Mailing Address, if different than street address)

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

Aaron J. Armstrong

(Name)

201 S Hemlock Ct., Post Falls, ID 83854

(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Aaron J. Armstrong</u>	<u>201 S Hemlock Ct., Post Falls, ID 83854</u>
<u>Kathleen J. Armstrong</u>	<u>201 S Hemlock Ct., Post Falls, ID 83854</u>
<u>Amy J. Avery</u>	<u>12118 E 37th Ct., Spokane WA 99206</u>
_____	_____
_____	_____

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

201 S Hemlock Ct., Post Falls, ID 83854

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

Signature of a manager, member or authorized person.

Signature Aaron J. Armstrong

Typed Name: Aaron J. Armstrong

Signature _____

Typed Name: _____

Secretary of State use only
IDAHO SECRETARY OF STATE
08/03/2015 05:00
CK:9840 CT:103679 BH:1486414
1@ 100.00 = 100.00 ORGAN LLC #2

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