

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

11 OCT 18 AM 9: 54

(instructions or	т раск от аррпсацоп)	SAPPETABL DE CTAL
The name of the limited liability company is:		SECRETARY OF STALE STATE OF IDAHO
<ol> <li>The name of the limited liability</li> </ol>		5
	DEW 2, LLC	
<ol><li>The complete street and mailing</li></ol>	ng addresses of the init	ial designated/principal office:
50 East Shore Dr., Suite 120, Eag	le, ID 83616	
(Street Address)		
(Mailing Address, if different than street ad	dress)	
3. The name and complete stree	t address of the registe	red agent:
Scott Adcock	<u> </u>	Suite 120, Eagle, ID 83616
(Name)	(Street Address)	
4. The name and address of at le	aget and mamber or me	magar of the limited liability
	sast one member or ma	mager of the infilted liability
company:		Address
<u>Name</u>		
Scott Adcock	50 East Shore Dr.,	Suite 120, Eagle, ID 83616
	<u> </u>	
	<del>.</del>	
5. Mailing address for future corr	esnondence (annual re	nort notices):
•	•	port nouocay.
50 East Shore Dr., Suite 120, Eagl	e, ID 83616	Access to the state of the stat
. Future effective date of filing (optional):		·
A.		
Signature of a manager, memb	or or authorized	
<del>-</del>	er or authorized	
person.	·	Secretary of State use only
Name turn	2	
gnature		W107599
yped Name: Scott Adcock	<del></del>	
		IDAHO SECRETARY OF STATE
Signature		10/18/2011 05:00 CK: 1395 CT: 249816 BH: 1294623
·3· ·~ · · · · · · · · · · · · · · · · ·	<del></del>	1 8 189 89 = 189 88 DRGON LLC H 2

Typed Name: