

FILED EFFECTIVE

251



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2015 SEP -8 AM 10: 28

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

ICE ADVENTURES LLC

2. The complete street and mailing addresses of the principal office is:

4800 MAJESTIC VIEW DR

IDAHO FALLS ID 83406

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

DAVID CHAMBERLAIN

4800 MAJESTIC VIEW DR; IDAHO FALLS ID 83406

4. The name and address of at least one governor of the limited liability company:

DAVID CHAMBERLAIN

4800 MAJESTIC VIEW DR; IDAHO FALLS ID 83406

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

4800 MAJESTIC VIEW DR, IDAHO FALLS, ID 83406

Signature of organizer(s).

Printed Name: DAVID CHAMBERLAIN

Signature: [Handwritten Signature]

Printed Name: DAVID CHAMBERLAIN

Signature: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

09/08/2015 05:00

CR:8079 CT:314257 BH:1491179

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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