

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

2015 JUN 29 AM 10: 45

U.S.	(Instructions on back	of application	۱)	SECRETARY OF
1.	The name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO	
	Zions Management LLC			•••
2.	The complete street and mailing addresses of the initial designated office:			
	919 South 25th Suite 103			
	(Street Address) Ammon, ID 83406			
	(Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	Tyler Schwendiman	5304 Tildy Cir, Ammon, ID 83406		
	(Name)	(Street Address		
4.	The name and address of at least of company:	one member o	r manager of the li	mited liability
	Tyler Schwendiman 50% Managing M.	5304 Tildy Ci	r, Ammon, ID 83406	
	Keith Rasmussen 50%	6408 S 5th W, Idaho Falls 83404		
5.	Mailing address for future correspon	ndence (annu	al report notices):	
	919 South 25th East Suite 103 Ammon,	ID 83406		
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ъ.	Future effective date of filing (option	nai):		
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per	son.	I	Carratan	of Chata was sub-
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-	nature Keith Rasmussen	<del></del>	( )	153443
ryp	ed Name. Keith Rasmussen		$\omega$	$\nu \cup \nu = \nu = \nu$

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