

FILED EFFECTIVE

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 DEC 19 PM 4:09

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Jayo Insurance, LLC

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

10564 W. Business Park Lane, Boise, ID 83709

(Street Address)

(Mailing Address, if different than street address)

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

Doug Jayo

(Name)

10564 W. Business Park Lane, Boise, ID 83709

(Street Address)

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

NameAddress

Doug Jayo

10564 W. Business Park Lane, Boise, ID 83709

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

10564 W. Business Park Lane, Boise, ID 83709

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Michael R. Jones, organizer

Signature

Typed Name: _____

Secretary of State use only

 IDAHO SECRETARY OF STATE
 12/19/2013 05:00
 CK: 3675 CT: 155443 BH: 1402511
 1 @ 100.00 = 100.00 ORGAN LLC # 2

WL32324