

Printed Name:

Signature:_

Rev. 08/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2015 SEP 24 PM 3: 31 SECRETARY OF STATE STATE OF IDAHO

Complete and submit the application in duplicate.

(Remember to incli	de the words "Limited Liability Con	npany," "Limited Company, Id	or the apprevial	IONS L.L.C)., ELO, 01 LO)	
•	and mailing addresses of		e is:			
	Orive, Boise, Idaho 837	09 ————————				
(Street Address)						
(Mailing Address, if different)	 					
The name and compl	ete street address of the	e registered agent:				
Angus Myers	12101 West	Keates Drive	Boise	ID	83709	
(Name)	(Address)					
The name and addre	ss of at least one gover	nor of the limited lia	bility comp	any:		
Angus Myers	12101	12101 West Keates Drive, Boise, ID 83709				
(Na:ne)	(Address)					
(Name)	(Address)					
(Name)	(Address)					
(Name)	(Address)					
•	uture correspondence (a	annual report notice	·s):			
	Orive, Boise, ID 83709					
(Address)						
nature of organizer(s).						
•	ers.		Secretary	of State u	ise only	
ted Name: Angus Mye	···	-				
nature:					TRETARY OF STATE	
lature.				-	'2015 05:00 271466 BH:149367	

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