

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2815 APR 22 AM 11. 99

<u> </u>	(Instructions on	back of application)	Tara Mr. 14 ES MILLINE SI
	The name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO
2. The complete street and mailing addresses of the initial designated office: 2295 Ross Avenue, Ammon, Idaho, 83406			itial designated office:
(Street Add		, 83406	
(Mailing Ac	ldress, if different than street add	Iress)	
3. The nam	ne and complete street	address of the regist	ered agent:
<u></u>	R. Clawson	2295 Ross Avenue, Ammon, Idaho, 83406	
(Name)		(Street Address)	
	R. Clawson M. Clawson	2295 Ross Avenue, Ammoл, Idaho, 83406 2295 Ross Avenue, Ammoл, Idaho, 83406	
		ZZOO ITOGO AVEIII	as, Allinoi, Idalio, 65400
	address for future corre	· ·	eport notices):
		, 00400	
6. Future e	ffective date of filing (d	optional):	
Signature o	f a manager, membe	er or authorized	
Signature	Kyn B Men	lu	Secretary of State use only
Typed Name	Ryan B. Meikle		IDAHO SECRETARY OF STAT
Signature			04/22/2015 05:00 CK:PREPAID CT:12945 BH:1
Typed Name			10 100.00 = 100.00 ORGAN 10 20.00 = 20.00 EXPEDIT

W150712