



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 OCT 20 AM 10:10

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Blanchard Insurance Agency, LLC

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

11047 W Rose Lake St Star ID 83669

(Street Address)

(Mailing Address, if different than street address)

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

Tom Blanchard

(Name)

11047 W Rose Lake St Star ID 83669

(Street Address)

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

Name

Address

Tom Blanchard

11047 W Rose Lake St Star ID 83669

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

11047 W Rose Lake St Star ID 83669

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Tom Blanchard

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

10/20/2014 05:00

CK:120 CT:302342 BH:1445908

1@ 100.00 = 100.00 ORGAN LLC #2

W143404