## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY 2015 FEB 12 AM 8: 48

FILED EFFECTIVE

<b>₹ 9 9</b>	(Instructions on	back of application	SECRETARY OF	
1. The nar	me of the limited liability	company is:	STATE OF IDAHO	
	alls PC Repair and Recyclin	•	.0	
	The complete street and mailing addresses of the initial designated office:			
	1670 W. Broadway Idaho Falls, ID 83402			
(Street Ac	ddress) Bree Fielding 838 E 800 N Sh	policy ID 93274		
	Address, if different than street addr			
. The nar	e name and complete street address of the registered agent:			
Sheree	Fielding	838 E 800 N Shelley, ID 83274		
(Name)		(Street Address)		
i. The nar compar		ast one member bi	manager of the limited liability  Address	
Sheree	Fielding	838 E 800 N S	838 E 800 N Shelley, ID 83274	
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. Mailia			at annual motionals	
_	address for future corre eree Fielding 838 E 800 N Sh	•	arreport notices).	
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erson.	or a manager, membe	or authorized		
	A *1.		Secretary of State use only	
Signature Shell Fulding			IDAHO SECRETARY OF STATE	
yped Nam	e: Sheree Fielding	)	02/12/2015 05:00 CK:1659 CT:116006 BH:146149	
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yped Nam	e:	<u> </u>	W147761	
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