



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

NOV 20 AM 11:57

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Pure Sterilization, LLC

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

297 North 2100 East, St. Anthony, ID 83445
(Street Address)

(Mailing Address, if different than street address)

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

Hillarie Hepworth
(Name)

297 North 2100 East, St. Anthony, ID 83445
(Street Address)

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

Name

Address

Jordan Hepworth

297 North 2100 East St. Anthony, ID 83445

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

297 North 2100 East St. Anthony, ID 83445

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name:

Jordan Hepworth

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

11/20/2014 05:00

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