



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 NOV 18 PM 3:49

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Beacon Rock LLC

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

1161 W. River St., #160, Boise, Idaho 83702

(Street Address)

(Mailing Address, if different than street address)

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

Michael J. Swope

(Name)

1161 W. River St., #160, Boise, Idaho 83702

(Street Address)

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

Name

Address

Michael J. Swope

1161 W. River St., #160, Boise, Idaho 83702

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

1161 W. River St., #160, Boise, Idaho 83702

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Michael J. Swope

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
11/18/2013 05:00
LK: 69239 CT: 67242 BH: 1398524
1 @ 100.00 = 100.00 ORGAN LLC # 2