



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2014 DEC 30 PM 3:22

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

TBIRD ENTERPRISES, LLC

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

5295 NORTH 45TH EAST, IDAHO FALLS, ID 83401

(Street Address)

(Mailing Address, if different than street address)

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

TAYLOR BIRD

(Name)

5295 NORTH 45TH EAST, IDAHO FALLS, ID 83401

(Street Address)

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

Name

Address

TAYLOR BIRD

5295 NORTH 45TH EAST, IDAHO FALLS, ID 83401

KRISTY BIRD

5295 NORTH 45TH EAST, IDAHO FALLS, ID 83401

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

ALLIED FINANCIAL SERVICES, PO BOX 674, REXBURG, ID 83440

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

Signature of a manager, member or authorized person.

Signature

Kirby J. Forbush, CPA

Typed Name:

KIRBY J. FORBUSH, CPA

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/31/2014 05:00

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