



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JUL -6 AM 9:23

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Biosop, LLC

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

3160 Sunnybrook Idaho Falls, ID. 83404

(Street Address)

(Mailing Address, if different than street address)

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

Jay Hebdon

3160 Sunntbrook Idaho Falls, ID. 83404

(Name)

(Street Address)

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

Name

Jay Hebdon

Address

3160 Sunnybrook Idaho Falls ID. 83404

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

3160 Sunnybrook Idaho Falls, ID. 83404

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: Jay Hebdon

Signature _____

Typed Name: _____

Secretary of State use only

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CK: 1819 CT: 112527 BH: 1177580
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