

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

11 NOV 29 AM 10: 44

FILED EFFECTIVE

(Instructions on back of application)

SECRETARY OF STATE

1.	The name of the limited liability	company is: STATE OF IDAHO
	lda	aho Safety Escort Services IIc
2.	The complete street and mailing addresses of the initial designated office:	
	10977 W Richey Ct Boise, ID 83713	
	(Street Address) 10977 W Richey Ct Boise, ID 83713	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	John Thomas Rogers	10977 W Richey Ct Boise, ID 83713
	(Name)	(Street Address)
4.	The name and address of at leacompany:	ast one member or manager of the limited liability
	<u>Name</u>	<u>Address</u>
	John Thomas Rogers	10977 W Richey Ct Boise, ID 83713
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5 .	Mailing address for future correspondence (annual report notices):	
	10977 W Richey Ct Boise, ID 83713	
6	Cuture offective date of filing /o	ntional):
Ο.	ruture enective date or ming (o	ptional):
Si.	nature of a manager, membe	r or authorized
	SON.	
		Secretary of State use only
Sig	nature John Roges	
Тур	ped Name: John Rogers	·
Sia	nature	
	ped Name:	
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11/29/2011 05:00 CX: 841011 CT: 172099 BH: 1299597 1 0 100.00 = 100.00 ORGAN LLC N 2

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