

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application) OR MIG 27 PM 4: 00

	NO MARK I III I
1. The name of the limited liability com	
A + R Support LLC	SECRETARY OF STATE STATE OF IDAHO
2. The complete street and mailing add	resses of the initial designated/principal office:
4075 E Conklin De	Meridian IA 83646
(Street Address)	A Secto
(Mailing Address, if different than street address)	
3. The name and complete street addre	ss of the registered agent:
(Name)	(Street Address) Marcum St. Boise, 20 83 204
The name and address of at least one company:	e member or manager of the limited liability
Name	Address
Neil Asheraft	4075 E Conklin Dr. Meridian ID B3644
Mark Romriell	8298 W. Marcum St. Boise, TO 13704
	Both St. Marzom St. Doise, to 18704
-	
	-
5 Mailing address for firture comments	
5. Mailing address for future corresponde	ence (annual report notices):
- TO 15 E CONKIN	or Meridian ID 93646
6. Future effective date of filing (optional)	•
(optional)	
Signature of organizer(s). (An organizer is a me	ember oris
acting in behalf of a member or members).	5111501, 01 13
Signature of 1 of 1	Secretary of State use only
Signature National DAG	
Typed Name: Neil D Ashers ft	
Signature Mul Roseril	IDAHO SECRETARY OF STATE 08/27/2008 05:00
Typed Name: MAKK Romkiell	CK: 1991 CT: 229206 BH: 1133369 1 9 100.00 = 100.00 ORGAN LLC # 4
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