

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

10 SEP -9 AHII: 44

JECRETARY OF STATE

The semplete street and ma	illing addresses of the initial de	signated/principal office
		orginatod/printorpal office
1201 N. 16th St. Boise ID 83702		
(Street Address)		
(Mailing Address, if different than street	address)	
. The name and complete str	eet address of the registered a	gent:
. The hame and complete out	30, 223 , 300 0, 11, 0 1 0 g, 10 10 1 1 1 1	
Robert M. Rowett III	1201 N. 16th St. Boise ID	83702
LODELL M. LOMER III	1201111 10111 011 20100 1	
. The name and address of a company:	(Street Address) t least one member or manage	
(Name) . The name and address of a	(Street Address) t least one member or manage	Address
. The name and address of a company:	(Street Address) t least one member or manage	Address
(Name) The name and address of a company: Name	(Street Address) t least one member or manage	Address
. The name and address of a company: Name	(Street Address) t least one member or manage	Address
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(Name) I. The name and address of a company: Name	(Street Address) t least one member or manage	Address
(Name) I. The name and address of a company: Name	(Street Address) t least one member or manage	Address

Signature of a manager, member or authorized person.

6. Future effective date of filing (optional):

Signature _ F

Typed Name: Part

Signature _____

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

09/09/2010 05:00

CK: CASH CT: 251897 BH: 1238244
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