DFC 13 AM 8: 56



Signature\_

Typed Name: \_\_\_\_\_

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

		<b>∽</b>
۱.	The name of the limited liability	company is:  SECTION OF STATE STATE OF IDAHO
		2603 Bright Street, LLC
2.	The complete street and mailing addresses of the initial designated office:	
	4659 W. Saddle Ridge, Nampa, ID 8	33687
	(Street Address) P.O. Box 785, Meridian, ID 83680	
	(Mailing Address, if different than street address	ess)
3.	The name and complete street address of the registered agent:	
	John Cotner	4659 W. Saddle Ridge, Nampa, ID 83687
	(Name)	(Street Address)
	Name Name	Address
	company:	Address
	John Cotner	P.O. Box 785, Meridian, ID 83680
<b>5</b> .	Mailing address for future corre	spondence (annual report notices):
5.	•	spondence (annual report notices):
5.	Mailing address for future corre P. O. Box 785, Meridian, ID, 83680	spondence (annual report notices):
	P. O. Box 785, Meridian, ID, 83680	
	•	
5.	P. O. Box 785, Meridian, ID, 83680  Future effective date of filing (o	ptional):
sig	P. O. Box 785, Meridian, ID, 83680	ptional):er or authorized
6. Sig	P. O. Box 785, Meridian, ID, 83680  Future effective date of filing (or nature of a manager, memberson.	ptional):
6. Sig	P. O. Box 785, Meridian, ID, 83680  Future effective date of filing (or nature of a manager, member	ptional):er or authorized

IDAHO SECRETARY OF STATE
12/13/2011 05:00
CK: 5691 CT: 251126 BH: 1301501
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