

CERTIFICATE OF ORGANIZATION SECRETARY OF STATE OF STATE

AT E	(Instructions on back	k of application)
1.	The name of the limited liability company is:	
2.	The complete street and mailing addresses of the initial designated office: 1333 E DOBERMAN ST, MERIDIAN, ID 83642 (Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	JARED HEINER	1333 E DOBERMAN ST, MERIDIAN, ID 83642
	(Name)	(Street Address)
4.	The name and address of at least one member or manager of the limited liability company:	
	<u>Name</u>	Address
	JARED HEINER - MANAGER	1333 E DOBERMAN ST, MERIDIAN, ID 83642
5.	5. Mailing address for future correspondence (annual report notices): 1333 E DOBERMAN ST, MERIDIAN, ID 83642	
6.	. Future effective date of filing (optional):	
Sign	nature of a manager, member or son.	authorized
		Secretary of State use only
Sigr	ed Name: JARED HEINER	
тур	ed Name. States Helitert	
Sigr	nature	1DAHO SECRETARY OF STATE 12/11/2012 05:00
	ed Name:	

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9/21/2012

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