



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 APR -3 AM 8:38

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Mono Slab EZ Form LLC

2. The complete street and mailing addresses of the initial designated office:

4048 Sawtelle Peak Road, Island Park ID 83429

(Street Address)

PO Box 371, Island Park ID 83429

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Amber Boyce

(Name)

4048 Sawtelle Peak Road Island Park ID 83429

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Lance Boyce

4048 Sawtelle Peak Road Island Park ID 83429

5. Mailing address for future correspondence (annual report notices):

PO Box 371 Island Park ID 83429

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Amber Boyce

Typed Name: Amber C Boyce

Signature Lance Boyce

Typed Name: Lance N Boyce

Secretary of State use only
IDAHO SECRETARY OF STATE
04/03/2015 05:00
CK:3374 CT:280357 BH:1469182
1@ 100.00 = 100.00 ORGAN LLC #2
1@ 20.00 = 20.00 EXPEDITE C #3

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