

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

2015 MAR -2 PM-12-51

FILED EFFECTIVE

(Instructions on back of application)

<ol> <li>The name of the limited liab RetroShelf , LLC</li> </ol>	oility company is:	OIALE OF	
2. The complete street and ma 945 East Lincoln, Idaho Falls, ID	-	initial designated office:	
(Street Address)			
(Mailing Address, if different than street	address)		
3. The name and complete stre	eet address of the re	gistered agent:	
Brian Crandall		, Idaho Falls, ID 83402	
(Name)	(Street Address	(Street Address)	
I. The name and address of al company:	least one member o	r manager of the limited liability	
<u>Name</u> Steve Waters	842 Dalmatio	Address 842 Dalmation, Idaho Falls, ID	
Brian Crandall	390 Troy Ave., Idaho Fails, ID 83402		
Chad Heath	5060 Wild Du	5060 Wild Dunes Ln., Idaho Falls, ID 83404	
5. Mailing address for future co	,	al report notices):	
. Future effective date of filing	ı (optional):		
ignature of a manager, memerson.	nber or authorized		
Mhale		Secretary of State use only	
ignature ( //O// // // // Chad Heath		IDAHO SECRETARY OF STATE 03/02/2015 05:00	
yped Name: Chad Heath		CK:7242 CT:210000 BH:14 16 100.00 = 100.00 ORGAN	LLC
ignature		1@ 20.00 = 20.00 EXPEDIT	E C
yped Name:		W148357	

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