

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

The name of the limited liability company is:

Complete and submit the application in duplicate.

2018 FEB -6 PM 2: 06

SECRETARY OF STATE
STATE OF IDAHO

2105 E Cedar Point Ln Idaho Falls, ID 83401			
(Street Address):  Moling Address, if different:  The name of the registered agent and street address of the registered agent:			
		Kolban Scott	2105 E Cedar Point Ln Idaho Falls, ID 83401
		tiaire)	i Address cannot be a post office pox or postal med box:
Cryshel Scott	2105 E Cedar Point Ln Idaho Falls, ID 83401		
Crysnel Scott	(Address)		
Name:	(Address:		
	(Address)		

Signature of organizer(s).

Signature:

Printed Name: Kolban Scott

Signature: ( ) Why of

Printed Name: Cryshel Scott

W195474

Rev. 11/2015

Secretary of State use only

1DAHO SECRETARY OF STATE 01/31/2018 05:00

CK:16307638 CT:172099 BH:1624227 16 100.00 = 100.00 ORGAN LLC #2 16 20.00 = 20.00 EXPEDITE C #3