

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 DEC 14 AM 8: 49

1.	The name of the limited liability company is: Bbelt Dent	STATE OF IDALIA
2.	The complete street and mailing addresses o	
	263 E. Woodlander Dr. (Street Address)	., Eagle, Id. 650 IG
	(Oliget Finalisas)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the	e registered agent:
		263 E. Woodjander Dr., Eagle, ld. 83616
	(Name) (Street Ad	idress)
4.	The name and address of at least one memb company:	per or manager of the limited liability
	Name	Address
	Brad Belt 2	263 E. Woodlander Dr. Eagle, Id. 83616
		-
		The state of the s
5.	Mailing address for future correspondence (a 263 E. Woodlander Dr.	
6.	Future effective date of filing (optional):	
Sig	nature of organizer(s). (An organizer is a member, o	or is
_	ng in behalf of a member or members).	
Sia	nature	Secretary of State use only
	oed Name: Brad Belt	
	nature	IDAHO SECRETARY OF STATE 12/14/2009 05:200 CX: 1181 CT: 242992 BH: 1199827 1 8 100.88 = 180.08 ORGAN LLC # 2
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