

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 OCT 11 AM 9:24

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

TRIPLE ACQUISITIONS LLC

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

161 5th Ave S Ste 105, Twin Falls, ID 83301

(Street Address)

P.O. Box 528, Twin Falls, ID 83303

(Mailing Address, if different than street address)

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

Patricia Migliuri

(Name)

730 Milner St, Buhl, ID 83316

(Street Address)

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

Name**Address**

Patricia Migliuri

730 Milner St, Buhl, ID 83316

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

P.O. Box 528, Twin Falls, ID 83303

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Patricia Migliuri

Signature

Typed Name:

Secretary of State use only

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10/11/2013 05:00
CK: 113 CT: 200400 BH: 1393707
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