

251

**FILED EFFECTIVE**

# **CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

(Instructions on back of application)

2009 MAY 13 AM 10:53

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

\_\_\_\_\_ Sholder LLC \_\_\_\_\_

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

2301 Gladys Drive, Idaho Falls, ID 83401

(Street Address)

(Mailing Address, if different than street address)

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

David Sholder

(Name)

2301 Gladys Drive, Idaho Falls, ID 83401

(Street Address)

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

**Name**

David Sholder

**Address**

2301 Gladys Drive, Idaho Falls, ID 83401

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

2301 Gladys Drive, Idaho Falls, ID 83401

6. Future effective date of filing (optional): May 12, 2009

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature \_\_\_\_\_

Typed Name: David Sholder

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE  
05/13/2009 05:00  
CK: 239648 CT: 172899 SN: 1178267  
1 @ 100.00 = 100.00 ORGAN LLC # 2  
1 @ 20.00 = 20.00 EXPEDITE C # 3

WP3918