

Printed Name:

Signature:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2018 SEP 17 AM-9: 48

SECRETARY OF STATE STATE OF IDAHO

W208825

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed
Complete and submit the application in <u>duplicate</u>.

(Remember to include the	words "Limited Liability Company." "Limited Company. "or the abbreviations L.L.C., LLC, or LC)
The complete street and mai	ling addresses of the principal office is:
3770 Autumnwood Dr. Am	mon ld. 83406
(Street Address)	
Mailing Address, if different)	
The name and complete stre	et address of the registered agent:
Dennis Lopez	Autumnwood Dr. Ammon Id. 83406
(Name)	(Address ⁵
The name and address of at	least one governor of the limited liability company:
Dennis Lopez	Autumnwood Dr. Ammon Id. 83406
(Name)	(Address)
(Name)	(Address)
(Name)	(Address)
(Nama)	(Address)
(Name)	
	rrespondence (annual report notices):
	rrespondence (annual report notices):
Mailing address for future co	, ,
Mailing address for future co 3770 Autumnwood Dr. Am	, ,