



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 MAR -3 PM 1:35

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

cm evans enterprises LLC

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

1094 s hilton #224 boise id 83705

(Street Address)

(Mailing Address, if different than street address)

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

cody evans

(Name)

1094 s hilton #224 boise id 83705

(Street Address)

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

Name

Address

cody evans

1094 s hilton #224 boise id 83705

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

1094 s hilton #224 boise id 83705

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature *Cody Evans*

Typed Name: cody evans

Signature _____

Typed Name: _____

Secretary of State use only

W135044

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03/03/2014 05:00
CK: 1723885 CT: 172099 BH: 1413125
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