

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2013 SEP 20 AM 9: 59

Total Con-	(motivations on back	or application,	ori co Hil 2: 23	
1.	The name of the limited liability com	pany is:	SECRETARY UP STATE STATE OF IDAHO	
2.	The complete street and mailing addresses of the initial designated office:  2003 W. Verona Ct., Meridian, ID 83646  (Street Address)			
	(Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	Robert C. Montgomery, Chtd.	2160 S. Twin Rapid	2160 S. Twin Rapid, Boise, ID 83709	
	(Name)	(Street Address)		
4.	The name and address of at least one member or manager of the limited liability company:			
	<u>Name</u>		Address	
	Caleb P. Kenner	2003 W. Verona Ct., Meridian, ID 83646		
5.	Mailing address for future correspondence (annual report notices): 2003 W. Verona Ct., Meridian, ID 83646			
6.	Future effective date of filing (optional):			
Sig	nature of a manager, member or	authorized		
pei	rson.		Secretary of State use only	
Sin	gnature / (aut	ع		
•	ped Name: Robert Montgomery (attorney			
Sig	gnature	ANA ICE	IDAHO SECRETARY OF STATE	
	ped Name:		09/20/2013 05:00 CK: 1555222 CT: 172099 BH: 1390777 1 e 100.00 = 100.00 ORGAN LLC # 2	

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