

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 2015 MAR -4 AM 8: 41

10 3	(Instructions on back of application		1)
1.	The name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO
••	Peak Residual, LLC		
2.	The complete street and mailing ac 1411 N 1070 E Shelley, ID 83274	ddresses of the	initial designated office:
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Brad C Erikson	1411 N 1070 E	Shelley, ID 83274
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name		Address
	Brad C Erikson	1411 N 1070 E	Shelley, ID 83274
5.	Mailing address for future correspond	ondence (annua	I report notices):
٠.	1411 N 1070 E Shelley, ID 83274		
6.	Future effective date of filing (option	onal):	
_	nature of a manager, member of son.	or authorized	
PU			Secretary of State use only
	nature Land		IDAHO SECRETARY OF STATE
Ту	ped Name: Brad C Erikson		03/04/2015 05:00
			CK:1059 CT:160926 BH:1464503 16 100.00 = 100.00 ORGAN LLC
-	nature		
Ty	oed Name:		

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