



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

Syringa Plat, LLC

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

5680 E Franklin Rd. Ste. 100 Nampa, ID 83687

(Street Address)

(Mailing Address, if different than street address)

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

Don Wixom

(Name)

5680 E Franklin Rd. Ste. 100 Nampa, ID 83687

(Street Address)

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

Name

Don Wixom

Address

16670 Rose Briar Ln. Nampa, ID 83687

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

5680 E Franklin Rd. Ste. 100 Nampa, ID 83687

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

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

Signature _____

Typed Name: _____

Don Wixom

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
11/12/2008 05:00
CK: 6127 CT: 230841 BH: 1144084
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W79117

FILED EFFECTIVE

08 NOV 12 AM 8:29

SECRETARY OF STATE
STATE OF IDAHO