

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 SEP -3 AM 8: 07

SECRETARY OF STATE

1. The name of the limited liability of	ompany is:		STATE OF IDAHC	)
· C	onrads Investmen	ts LLC		
2. The complete street and mailing a	addresses of the Pronghom Dr., Boi		ited/principal office	<b>:</b> :
(Street Address)				
(Mailing Address, if different than street address)	`			
3. The name and complete street ad		gistered agent:		
Timothy J. Conrads	75	75 S. Pronghorn Dr., Boise ID 83716		
(Name)	(Street Address	)		
The name and address of at least company:	one member o	or manager of t	ne limited liability	
<u>Name</u>		Address		
Timothy J. Conrads, Manager	75	75 S. Pronghorn Dr., Boise ID 83716		
	•			
				<u></u> ;
				<u></u> x'
5. Mailing address for future corresponds 75 S. P	ondence (annu Pronghorn Dr., Boi	•	s):	
6. Future effective date of filing (option	onal):	· · · · · ·		
Signature of organizer(s). (An organizer is acting in behalf of a member or members).	s a member, or is	San	retary of State use only	: :
Signature Th. I			enally of chare use unly	+ #
Signature // // // // Thomas V. Walk	er	L org. No. PIMD	. •	
Typed Name: Thomas V. Walk		B 8	Though OFFDETARY DE	STATE
Signature		Revised 07/2008	09/03/2 <b>009</b> ( K: 1328 CT: 230132 B	85 : 88 1: 1185585
Typed Name:		Need 1	e 196.90 = 100.00 CF	RGAN LLC #
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