

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY THIS MOVE LO DE 2- 20

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	(Instructions on back	of application)	SECRETARY OF STATE
1.	The name of the limited liability con	npany is:	STATE OF IDAHO
	BHAir, LLC		
2.	The complete street and mailing addresses of the initial designated office: 3875 American Way		
	(Street Address)		
	idaho Falls, ID 83402 (Malling Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Shawn D. Boyle	3875 American Way, Idaho Falls, ID 83402	
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name Brad Hall & Associates, Inc.	<u>Address</u> 3875 American Way, Idaho Falls, ID 83402	
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5.	Mailing address for future correspondence (annual report notices):		
	P.O. Box 50620, Idaho Falls, ID 83405		
6.	Future effective date of filing (option	nal):	
	nature of a manager, member or	authorized	
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	ped Name:		IDAHO SECRETARY OF STATE
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			CK: 1615436 CT: 172099 BH: 1398

9/21/2012

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