

CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

2013 JUL 11 PM 3: 57

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited linklife	STATE OF IDAHO"
1. The name of the limited liability co	трапу із:
Feather LLC	
	ddresses of the initial designated office:
3858 N. Garden Center Way, Ste.200, E	Boise, ID 83703
(Street Address) P.O. Box 518, Meridian, ID 83680	
(Mailing Address, if different than street address)	
3. The name and complete street add	dress of the registered agent:
Brian F. McColl	3858 N. Garden Center Way, Ste. 200, Boise, ID 83703
(Name)	(Street Address)
The name and address of at least company: Name	one member or manager of the limited liability Address
Brian F. McColl	3858 N. Garden Center Way, Ste. 200, Boise, ID 83703
5. Mailing address for future correspo	ondence (annual report notices):
P.O. Box 518, Meridian, ID 83680	
6. Future effective date of filing (optio	nal):
Signature of a manager, member o	r authorized
person.	Secretary of State use only
Signature Signature	
Typed Name: Brian F. McColl, Manager	
Typod Hamo.	
Signature	IDAHO_SECRETARY OF STATE
Typed Name:	97/11/2013 05:00 CK: 56834 CT: 58298 RH: 13817

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1 @ 100.00 = 100.00 ORGAN LLC # 2