



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 APR -1 PM 2:08

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

83 LLC

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

600 S. ORCHARD ST BOISE, ID 83706
(Street Address)

P.O. BOX 1431 BOISE ID 83701
(Mailing Address, if different than street address)

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

MARK GOODMAN
(Name)

4605 ROWELL DR. BOISE
(Street Address) ID. 83703

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

MARK GOODMAN
LINDA GOODMAN

P.O. BOX 1431 BOISE 108370
P.O. BOX 1431 BOISE 1083701

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

P.O. BOX 1431 BOISE, ID 83701

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 Mark Goodman
Typed Name: MARK GOODMAN

Signature _____
Typed Name: _____

Secretary of State use only

W92078

IDAHO SECRETARY OF STATE
04/01/2010 05:00
CK: 3387 CT: 187858 BN: 1215793
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