

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

	(Instructions on back	k of application)	2012 DEC 21 AM 3-0-
1.	The name of the limited liability con	mpany is:	SECRETARY OF STATE STATE OF IDAHO
2.	The complete street and mailing ad 2462 E. Sunshine Dr. Boise ID 83712 (Street Address)	dresses of the in	tial designated office:
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Dean J. Thompson (Name)	2462 E. Sunshine (Street Address)	Dr. Boise ID 83712
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u> Dean J. Thompson	2462 E. Sunshine	Address Dr. Boise ID 83712
5. I	Mailing address for future correspond 2462 E. Sunshine Dr. Boise ID 83712	dence (annual re	port notices):
6. I	- uture effective date of filing (optiona	al):	
Sign perso	ature of a manager, member or a	authorized	
	ature Dan J. Shung		Secretary of State use only
Type	d Name: Dean J. Thompson		
Signa Type	atured Name:		IDAHO SECRETARY OF STATE  12/21/2012 05:00  CK: 4223 CT: 277477 BH: 1352459 1 9 100.00 = 100.00 ORGAN LLC # 2
. ,,,,,,,,			7 6 100'80 = 180'00 OVOHU FFF # C

W120255