Printed Name: ___

Rev. 11/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2017 DEC -7 AM 9: 22

	Complete and submit the application in duplicate.	SECRETARY OF STATE STATE OF IDAHO
1.	The name of the limited liability company is:	STATE OF TOATIO
	Harrilen Connection LLC.	•
	Harrian Connection LLC. (Register to include the words "Limited Liability Company," "I	imited Company," or the abbreviations L.L.C., LLC, or LC
2.	The complete street and mailing addresses of the prince	sipal office is:
	2802 h. Silverleaf Way	
	meridian Ft 83646	
	(Mailing Address, if different)	
3.	The name of the registered agent and street address o	f the registered agent:
	KAHALINA SM ZHAMINAM) 2802 n Sillares	lead Way movidian Dr 92646
	(Address cannot be a po	leaf Wey meridian, 22 83646 at office box or postal mail box;
1	The paper and address of at least and account of the	insited liability company.
4.	The name and address of at least one governor of the	
	Kathrina M. Hanifan, 2502 N. Silve	rleaf Way Meridian, JD 83646
	U	v
	(Addmiss)	
	(Name) (Addrass)	
	(Name) (Ardress)	
5.	Mailing address for future correspondence (annual report notices):	
	2802 n. Silverleaf Way Meridia	in, IX 83646
	(Address)	
Sia	nature of organizer(s).	
		Secretary of State use only
Sigi	nature: Kathring M. Hanefen	IDAHO SECRETARY OF STATE
Prin	ited Name: Kathrine M. Hanifen	12/07/2017 05:00 CE:2116 CT:349363 BH:1615095
	- All Control of the	10100.00 = 100.00 ORGAN LLC 42
Signature:		10 20.00 = 20.00 EXPEDITE C #3 10 20.00 = 20.00 CORP SUR #4
		gape and a contract to the same and the same

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