



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE
LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 OCT - 1 AM 8:45

SECRETARY OF STATE
 STATE OF IDAHO

1. The name of the limited liability company is:

J & N McCormick LLC

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

10392 W. Springdale St., Boise, ID 83704

(Street Address)

(Mailing Address, if different than street address)

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

Raymon Ware

(Name)

149 3rd Avenue East, Twin Falls, ID 83303

(Street Address)

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

Name

Jon W. McCormick

Address

10392 W. Springdale St., Boise, ID 83704

Neva J. McCormick

10392 W. Springdale St., Boise, ID 83704

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

10392 W Springdale St Boise ID 83704

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Jon W. McCormick

Signature

Typed Name: Neva J. McCormick

Secretary of State use only

W129779