

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2014 JUN 30 AM 9: 44

(Instructions on back of application)

| 1. T | he name of the limited liability com | pany is: | FOREIRRY OF STATE STATE OF TRAKO |
|---|--|---|---|
| | REAL BEAR, LLC | | |
| | The complete street and mailing addresses of the initial designated office: 3500 MAIBEN AVENUE, IDAHO FALLS, ID 83406-7900 | | |
| | (Street Address) SAME | | |
| | Mailing Address, if different than street address) | | |
| 3. T | ne name and complete street address of the registered agent: | | |
| | VERLE K LANDON | 3500 MAIBEN AVENUE, IDAHO FALLS, ID 83401 | |
| • | (Name) | (Street Address) | |
| | The name and address of at least one member or manager of the limited liability company: | | |
| | Name | Address | |
| | VERLE K LANDON | 3500 MAIBEN AVENUE, IDA | AHO FALLS, ID 83401 |
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| | | | |
| 5. N | Mailing address for future correspond | dence (annual report noti | ces): |
| | 3500 MAIBEN AVENUE, IDAHO FALLS, I | D 83401-7900 | |
| 6 F | uture effective date of filing (optiona | ıl. | |
| 0. 1 | uture enective date or ming (options | | |
| Siana | ature of a manager, member or | authorized | |
| perso | • | | |
| ٥. | , 7 0 x 1 0. | | Secretary of State use only IDAHO SECRETARY OF STATE |
| Signature Oulet. Jandon Typed Name: VERLE K LANDON | | | 06/30/2014 05:00 |
| ı yped | o Name: VENEE REMOVE | | 3755 CT:67982 BH:1431200 .00 = 100.00 ORGAN LLC # |
| Signa | ature | | 10051.0 |
| Туре | d Name: | | W 139560 |

cert_org_lic Rev. 07/2010