CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2017 JUL 27 AM 9: 09

SECRETARY OF

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

Printed Name: _____

Rev. 11/2015

Complete and submit the application in <u>duplicate</u>.

The name of the limited liabi	lity company is:	STATE OF IDAHO
	vords "Limited Liability Company," "L	imited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and ma 2956 Lincoln Road, Idaho F		ipal office is:
(Street Address)		
(Mailing Address, if different)		
The name of the registered a	agent and street address of	the registered agent:
Kipp L. Manwaring	2677 E. 17th St., Ste. 600, Idaho Falls, ID 83406 (Address cannot be a post office box or postal mail box)	
(Name)		
The name and address of at	least one governor of the l	imited liability company:
Kimberly Taylor		ad, Idaho Falls, ID 83401
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Address)	
(Name)		
(Name)	(Address)	
Mailing address for future co	orrespondence (annual repo	ort notices):
2677 E. 17th St., Ste. 600, I	daho Falls, ID 83406	
(Address)		
nature of organizer(s).	_	
nature: Kipp Mann	neme	Secretary of State use only IDAHO SECRETARY OF STATE
, ,		07/27/2017 05:00 CK:2114 CT:179536 BH:1595460
ted Name: Kipp Manwaring		10 100.00 = 100.00 ORGAN LLC #2
nature:		
		W184789