



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

08 DEC -5 AM 8:45

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Carroll L.L.C.

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

192 Earl Drive TF ID 83301

(Street Address)

(Mailing Address, if different than street address)

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

Craig E Carroll

192 Earl Drive TF ID 83301

(Name)

(Street Address)

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

Name

Address

Craig E. Carroll

192 Earl Drive; Twin Falls, ID 83301

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

192 Earl Drive; Twin Falls, Idaho 83301

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Craig E Carroll
Typed Name: Craig E. Carroll

Signature _____
Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
12/05/2008 05:00
CK: 4533 CT: 231901 DN: 1146997
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W79625