

State of Idaho

Office of the Secretary of State

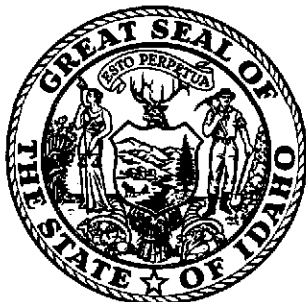
**CERTIFICATE OF AUTHORITY
OF
CEM LIFTS, INC.**

File Number C 204813

I, LAWRENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an Application for Certificate of Authority, duly executed pursuant to the provisions of the Idaho Business Corporation Act, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Authority to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: January 29, 2015



Lawrence Denney
SECRETARY OF STATE

By *John R. Brown*



APPLICATION FOR CERTIFICATE OF AUTHORITY (For Profit)

(Instructions on Back of Application)

2015 JAN 29 PM 2: 30

SECRETARY OF STATE
STATE OF IDAHO

The undersigned Corporation applies for a Certificate of Authority and states as follows:

1. The name of the corporation is:
CEM Lifts, Inc.
2. The name which it shall use in Idaho is: CEM Lifts, Inc.
3. It is incorporated under the laws of: Washington
4. Its date of incorporation is: 6/2/2011
5. The address of its principal office is:
560 N Greensferry Rd. Post Falls, ID 83854
6. The address to which correspondence should be addressed, if different from item 5, is:

7. The street address of its registered office in Idaho is: 560 N Greensferry Rd. Post Falls, ID 83854
and its registered agent in Idaho at that address is: Chris Sprinkle
8. The names and respective business addresses of its directors and officers are:

Name	Title	Business Address
<u>Chris Sprinkle</u>	<u>President</u>	<u>560 N Greensferry Rd. Post Falls, ID 8385</u>
<u>Kathy Sprinkle</u>	<u>Officer</u>	<u>Same as Above</u>
<u>Brandon Sprinkle</u>	<u>Officer</u>	<u>Same as Above</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Dated: 1/22/2015

Signature:

Typed Name: Kathy Sprinkle

Capacity: Officer
[The signer must be a director or an officer of the corporation.]

Customer Acct # : _____
(if using pre-paid account)

Secretary of State use only
IDA

01/29/2015 05:00

CK:1571 CT:288046 BH:1459383
1@ 100.00 = 100.00 AUTH PRO #2
1@ 20.00 = 20.00 EXPEDITE C #3

C204813

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Revised 08/2005

Web Form

UNITED STATES OF AMERICA

The State of



Washington

Secretary of State

I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal,
hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

CEM LIFTS, INC.

I FURTHER CERTIFY that the records on file in this office show that the above named Profit Corporation was formed under the laws of the State of WA and was issued a Certificate Of Incorporation in Washington on 6/2/2011.

I FURTHER CERTIFY that as of the date of this certificate, CEM LIFTS, INC. remains active and has complied with the filing requirements of this office.

Date: January 22, 2015

UBI: 603-118-045



Given under my hand and the Seal of the State
of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State