



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 JAN 20 AM 10:58

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Debra J Burroughs LLC

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

5075 N. Lawsonia Place, Boise, ID 83713

(Street Address)

(Mailing Address, if different than street address)

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

Debra J Burroughs

(Name)

5075 N. Lawsonia Place, Boise, ID 83713

(Street Address)

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

Name

Address

Debra J. Burroughs

5075 N. Lawsonia Place, Boise, ID 83713

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

5075 N. Lawsonia Place, Boise, ID 83713

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Debra J. Burroughs

Typed Name: Debra J. Burroughs

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

01/20/2015 05:00

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