



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2012 SEP 24 PM 4:32

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

J, L, C & P-4, LLC

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

3190 N. Esquire Drive, #202, Boise, Idaho 83704

(Street Address)

P.O. Box 4685, Boise, Idaho 83711

(Mailing Address, if different than street address)

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

Lori A. Thom

(Name)

3190 N. Esquire Dr., #202, Boise, Idaho 83704

(Street Address)

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

Name

Address

Lori A. Thom

P.O. Box 4685, Boise, Idaho 83711

Jay M. Thom

P.O. Box 4685, Boise, Idaho 83711

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

P.O. Box 4685, Boise, Idaho 83711

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name: Lori A. Thom

Signature

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
09/25/2012 05:00  
CK: 10067 CT: 259384 BH: 1341103  
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