

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2009 JAN 20 AM 8:46

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Bowen Arrow Services, LLC

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

2122 Colonial Lane, Pocatello ID 83201

(Street Address)

(Mailing Address, if different than street address)

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

Sean Bowen

(Name)

2122 Colonial Lane, Pocatello ID 83201

(Street Address)

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

Name**Address**

Tara Bowen

2122 Colonial Lane, Pocatello ID 83201

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

2122 Colonial Lane, Pocatello ID 83201

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

Sean Bowen

Typed Name:

Sean Bowen

Signature

Tara Bowen

Typed Name:

Tara Bowen

Secretary of State use only

S:\corp\mform\llc form\llc form_01_01_08.PMD
Revised 07/2008
 IDAHO SECRETARY OF STATE
 01/20/2009 05:00
 CK: 8358 CT: 233233 IN: 1152894
 1 @ 100.00 = 100.00 ORGAN LLC # 2

W 80737