		OF ORGANIZATIC BILITY COMPANY		
1. The na	(Instructions of the limited liab	on back of application)	SECRETARY OF S STATE OF IDAH	
	mplete street and ma Orchard St., Ste. 124, Bo	iling addresses of the initial c ise, ID 83705	designated office:	
	Address, if different than street a me and complete street	address) eet address of the registered	agent:	
Greg 2 (Name)	/weiger	410 S. Orchard St., Ste (Street Address)	410 S. Orchard St., Ste. 124, Boise, ID 83705 (Street Address)	
compa		least one member or manag	ger of the limited liability Address e. 124, Boise, ID 83705	
-	address for future co Orchard St., Ste. 124, Bo	rrespondence (annual report	t notices):	
		(optional):		
Signature person.	of a manager, mem	ber or authorized		
Signature	Brian J. Holleran, Att	omey	Secretary of State use only	
	ie:		IDAHO SECRETARY OF STATE 02/21/2014 05:1 CK: 43324 CT: 2618 BH: 1411 1 0 109.09 = 109.89 Organ LLI	
012		cert_org_lic Rev. 07/2010	W134655	