

Typed Name:

CERTIFICATE OF ORGANIZATION

	🎒 LIMITED LIABILI	TY COM	PANY _{SECRETARY 0}
£ 70	(Instructions on bac	k of applicatio	PANY _{SECRETARY OF STATE}
1. T	he name of the limited liability co	mpany is:	UAHO
	S	harp Resources	пс
2. T	The complete street and mailing addresses of the initial designated office:		
,	714 Whisperwood Ct., Nampa, ID 83686		
	(Street Address)		- Constitution
-	(Mailing Address, if different than street address)		
3. T	The name and complete street address of the registered agent:		
•	Ted R. Sharp	714 Whisperwood Ct., Nampa, ID 83686	
•	(Name)	(Street Address	3)
	he name and address of at least of a least of the second s	one member (or manager of the limited liability
-	Ted R. Sharp	714 Whiener	wood Ct., Nampa, ID 83686
-	Ted R. Sharp	714 Willsper	wood Ct., Nampa, 10 03000
-	Sheri A. Sharp	714 Whisperwood Ct., Nampa, ID 83686	
-			
-		· _	
-			
5. M	Mailing address for future correspondence (annual report notices):		
	714 Whisperwood Ct., Nampa, ID 83686		
	714 Williapsi Wood Cit, Manipa, 10 00000		
6. F	Future effective date of filing (optional):		
Signa perso	ture of a manager, member on	r authorized	
•		\wedge	Secretary of State use only
Signa	/	<u> </u>	
Typed	Name: Ted R. Sharp, Managing Me	nber	
O:	4.		IDAHO SECRETARY OF STATE
Signa	ture		GO / GC / GO / G 1/1/10

IDAHO SECRETARY OF STATE 49/06/2012 05:00 CK: 1124374 CT: 172099 BH: 1338850 1 9 100.00 = 100.00 ORGAN LLC # 2

W117105