

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

09 MAY 26 AM 9: 26

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability comp	oany is:	STATE OF IDAHO	
	Rogers Co	onstruction Services,	LLC	
2.	The complete street and mailing addr	al designated/principal office:		
	685 East Bottle	Bay Road Sagle Ida	aho 83860	
	(Street Address)			
	(Mailing Address, if different than street address)			
3.	The name and complete street addre	ss of the register	red agent:	
	David Rogers	685 East Bottl	te Bay Road Sagle Idaho 83860	
	(Name)	(Street Address)		
4.	The name and address of at least one company:	e member or ma	nager of the limited liability	
	Name		Address	s :
	David Rogers	685 East Bott	tle Bay Road Sagle Idaho 83860	
			<u> </u>	
			No. of the control of	
	<u> </u>			
F	Mailing address for future correspond	lence (annual rer	nort natices):	,
IJ.		Road Sagle, Idaho		
			and the second s	1
6.	Future effective date of filing (optional	d):		
_	nature of organizer(s). (An organizer is a r	member, or is		
auti	ing in Denois of a member of morniora).	g	Secretary of State use only	
Sig	nature			
Ту	ped Name: David Rogers	art on		
٠		9002 2,8mmo;c	IDANO SECRETARY OF STATE	
Sig	nature	PI OUZ	95/26/2009 95 i 96 CK: 1448 CT: 237392 3N: 117167	2
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