

Signature:

## AMENDMENT TO CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2017 SEP 18 PM 12: 14

SECRETARY OF STATE STATE OF IDAHO

Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$30.00.

Complete and submit the application in  $\underline{\text{duplicate}}.$ 

| 1.     | The name of the limited liability company is: Strong Wise Investments, LLC                                     |                     |                                  |  |
|--------|--|---------------------|----------------------------------|--|
| 2.     | The date the certificate of organization was originally filed : 11/20/2012                                     |                     |                                  |  |
| 3.     | The name of the limited liability company is amended to: Strongwise Security, LLC                              |                     |                                  |  |
| 4.     | The complete   | _                   | dresses of the princip           | oal office is amended to:                            |
|        | (Street Address) Boise, ID 83706   |                     |                                  |  |
|        | (Mailing Address, if different)  |                     |                                  |  |
| 5.     | The mailing address for future correspondence (annual reports) is amended to: 1925 N. Larch St. Boise ID 83706 |                     |                                  |  |
|        | (Address)  |                     |                                  |  |
| 6.     | The name and address of the managers/members shall be amended as follows:  1925 N. Larch St. Boise ID 83706    |                     |                                  |  |
| Ado    | i: 🗌 Delete: 🗌   | Steve Banta         | (Address)                        | on St. Boise ID 83706                                |
| Ado    | d: 🔲 Delete: 🗌   | Lisa Banta          | 1925 N. Larch St. Boise ID 83706 |  |
| Ado    | d: 🔲 Delete: 🗀   | (Name)              | (Address)                        |  |
|        |  | (Name)              | (Address)                        |  |
| 7.     | •  | manager, member, or | authorized person.               | Secretary of State use only IDAHO SECRETARY OF STATE |
|        | ed Name: Stev  | е вапта             |                                  | 09/18/2017 05:00<br>CK:14691938 CT:172099 BH:1603266 |
| Signa  | ature of the   | X Det               |                                  | 10 30.00 = 30.00 DEGAN AMEN #3                       |
| Printe | ed Name:   |                     |                                  | MIDDA  |