

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 09 MAR -2 AM 8:31

CE & OF	(Instructions on back of application) SECRETARY OF STATE
1. Th	ne name of the limited liability company is:
2 Th	ne complete street and mailing addresses of the initial designated/principal office:
4. II	
(\$	3062 W Kandice st. Meridian Id. 83646
<u>(</u>	Mailing Address, if different than street address)
	ne name and complete street address of the registered agent:
	Jennis Wickstrom 3062 U Kandice Meridian Idaho (Street Address) 83646
	ne name and address of at least one member or manager of the limited liability ompany:
	Name Address
7	Dennis Wickstrom 3062 w Kendice Mendian Id
	83646
-	Pamela Wickstrom 3062 W Kandice Meridian Id
_	83646
	377
_	
5. Ma	ailing address for future correspondence (annual report notices):
•	3062 W Kandice Meridian Id 83646
•	
6. Fu	ıture effective date of filing (optional):
_	ure of organizer(s). (An organizer is a member, or is
acting if	n behalf of a member or members). Secretary of State use only
Signat	Name: Dennis Wickstram Sure Name: Dennis Wickstram Sure Name: 1980 07 9 95 200 CK: 4730 CT: 234689 BH: 1159139 1 2 188 08 = 100 00 00000 Mars.
Typed	Name: Dennis Wickstram
	IDAHO SECRETARY OF STATE
Signat	ure 03/92/2009 05:00 CK: 4730 CT: 234689 BH: 1159139
Typed	Name: 1 9 180,00 = 100,00 Opposition and the second

1 8 20.00 = 20.00 EXPEDITE C # 3

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