

Signature:__

Rev. 07/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE
2015 AUG 24 PM 12: 26
SECRETARY

SECRETARY OF STATE STATE OF IDAHO

Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$100.00.

Complete and submit the application in duplicate.

(Remember to include the w	ords "Limited Liability Company," "Limited Company	j, "or the abbreviations L.L.C.,	, LLC, or LC	C)	
The complete street and mag	ailing addresses of the principal off	ice is: American Falls	ΙD	83	211
(Street Address) PO Box 64		(City) (State) (Z American Falls ID 832		Zipcode) 211	
(Mailing Address, if different)		(City)	(State)	()	Zipcode)
The name and complete str	reet address of the registered agen	ıt:			
Susan Chipps	2646 Lakeview Road	Americar	ı Falls	ID	83211
(Name)	(Address)	(City)	(Sta	ate)	(Zipcode
Susan Chipps (Name)	2646 Lakeview Road (Address)	America:		ID ate)	8 3211 (Zipcode
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(Name) (Name)	(Address)	(City)		tate) tate)	(Zipcod
(Name)		(City)			
(Name)	(Address)	(City)	(Si	tate)	
^(Name) Mailing address for future o	(Address)	(City)	(Si	tate)	(Zipcod
(Name) Mailing address for future of PO Box 64	(Address)	(City) ces): American Fa	(S)	tate)	(Zipcod
(Name) Mailing address for future of PO Box 64 (Address) ature of organizer(s).	(Address)	(City) ces): American Fa	(Si	tate)	(Zipcod
(Name) Mailing address for future of PO Box 64 (Address)	(Address)	(City) ces): American Fa (City)	(Side) (State) conly RETARY 2015	D OF	(Zipcode 83211 (Zipcode

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