

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Signature:

Printed Name:

Rev. 11/2015

2017 APR 18 AM 10: 22

Complete and submit the application in duplicate.

SECRETARY OF STATE STATE OF IDAHO

(Remember to include th	e words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and n	nailing addresses of the principal office is:
4109 W Temple Drive, Ea	gle Idaho 83616
(Sireet Address)	
(Mailing Address, if different)	
The name of the registere	d agent and street address of the registered agent:
David Jenson	4109 W Temple Drive, Eagle ID 83616
(Name)	(Address cannot be a post office box or postal mail box)
The name and address of	at land one annual or after the stand to both a second
	at least one governor of the limited liability company:
David Jenson	4109 W Temple Drive, Eagle ID 83616
Name)	(Address)
Jodi Jenson	4109 W Temple Drive, Eagle ID 83616
(Name)	(Address)
(Name)	(Address)
(Name)	(Address)
Mailing address for future	correspondence (annual report notices):
4109 W Temple Drive, Ea	gle ID 83616
(Address)	
ature of organizer(s).	
ature:	Secretary of State use only
nuic	IDAHO SECRETARY OF STATE
ed Name: David Jenson	04/16/2017 05:00 CK:3009 CT:338192 BH:157977
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