## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

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

2817MAY -9 AM 9: 41

Complete and submit the application in duplicate.

The name of the limited liability company is: 1.

Signature:

Printed Name:

Street Address) P.O. BOX 2380 POST FALI	C ID 02077
Mailing Address, if different)	LS, ID. 03011
The name of the registered	agent and street address of the registered agent:
ADAM METZGER	1072 S. SIGNAL POINT RD. POST FALLS, ID. 83854
Name)	(Address cannot be a post office box or postal mail box)
Name)	IES LLC P.O. BOX 2380 POST FALLS, ID. 83877  (Address)
The name and address of a	t least one governor of the limited liability company:
Northe)	(Address)
Name)	(Address)
Name)	(Address)
Name)	(Address)
Mailing address for future co	orrespondence (annual report notices):
P.O. BOX 2380 POST FALI	. ,

IDAHO SECRETARY OF STATE 05/09/2017 05:00

CK: 13367512 CT: 172099 BH: 1583066 16 20.00 = 20.00 EXPEDITE C #2

Rev. 11/2015