

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2012 OCT 19 AM 8:57

4	(Instructions on bac	k of application)	Direction of the second
1.	ne name of the limited liability company is:		SECHETATO OF STATE STATE OF IDAHO
2.	The complete street and mailing addresses of the initial designated office: 885 PANCHERI DR		
	(Street Address) IDAHO FALLS ID 83402 (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	BRETT JACOBSON (Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name BRETT JACOBSON	Address 885 PANCHERI DR IDAHO FALLS ID 83402	
5.	Mailing address for future correspondence of the Mailing address for future correspond	• •	ort notices):
6.	Future effective date of filing (option	onal):	
-	nature of a manager, member o	r authorized	
•	nature / Stut / Just /	7	Secretary of State use only
_	ped Name. BRETT JACOBSON		
_	natureed Name:		IDAHO SECRETARY OF STATE 10/19/2012 05:00 CK; 6673 CT: 211321 BH: 1344369 1 0 100.00 = 100.00 GRGAM LLC # 2

WL18299