



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2015 MAR -3 PM 3:32

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

Coravi LLC

2. The complete street and mailing addresses of the initial designated office:

402 W. Thatcher Street, Boise, Idaho, 83702

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

David Arkoosh

(Name)

802 W. Bannock Street, Suite 204, Boise, Idaho, 83702

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

James Bedal

3604 Banner Avenue, Suite D, Boise, Idaho, 83709

5. Mailing address for future correspondence (annual report notices):

802 W. Bannock Street, Suite 204, Boise, Idaho, 83702

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: David Arkoosh

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

03/03/2015 05:00

CK:2628798 CT:172099 BH:1464369

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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