



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2015 FEB 11 AM 8:27

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

H.S.E.S. PARRIS LLC

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

14151 E. Gypsy Trail Harrison, Idaho 83833

(Street Address)

(Mailing Address, if different than street address)

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

Daniel Parris

(Name)

14151 E. Gypsy Trail Harrison, Idaho 83833

(Street Address)

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

**Name**

**Address**

Daniel Parris

14151 E. Gypsy Trail Harrison, Idaho 83833

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

14151 E. Gypsy Trail Harrison, Idaho 83833

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

*Daniel Parris*

Typed Name: Daniel Parris

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

02/11/2015 05:00

CK:3186 CT:306290 BH:1461272

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