

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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

Daniel Parris

Address

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

Secretary of State use only

IDaho SECRETARY OF STATE

02/11/2015 05:00

CK:3186 CT:306290 BH:1461272
1@ 100.00 = 100.00 ORGAN LLC #2

Signature _____
Typed Name: _____

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