

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 JUL -9	AH	8:	L
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SECRETARY STATE OF	35%
VIMIE UF	IUAHN -

The name of the Marvin Quist, LLC	·	mpany is:		STATE OF IDAHO
2. The complete str 903 E. Winding Cre (Street Address)	reet and mailing ac eek Dr., Ste 150, Eagle		e initial designated o	office:
(Mailing Address, if diff	ferent than street address)			
3. The name and c	omplete street add	ress of the reg	istered agent:	
Brian Boyle		903 E. Winding Cr. Dr., Ste 150, Eagle, ID 83616		
(Name)		(Street Address)		
4. The name and a company:	ddress of at least o	one member o	r manager of the lin	nited liability
	<u>Name</u>		<u>Address</u>	
Marvin Quist		903 E. Windin	g Creek Dr., Ste 150, E	agle, ID 83616
5. Mailing address f	for future correspo eek Dr., Ste 150, Eagl		al report notices):	
6. Future effective of	date of filing (option	nal):		-
Signature of a man	ager, member or	authorized _		
	2 /==	5	Secretary o	f State use only
Signature				
Typed Name: Brian L	. Boyle			

IDAHO SECRETARY OF STATE 17/09/2013 05:00 CK: 1419 CT: 285107 BH: 1381293 1 @ 100.00 = 100.00 ORGAN LLC # 2

W127043

Signature\_

Typed Name: