

Typed Name: _

CERTIFICATE OF ORGANIZATION 12 MAY 21 PM 12: 34 LIMITED LIABILITY COMPANY SECRETARY OF STATE

STATE OF IDAHO

| Mor | th Dakota Transfer Solutions LLC |
|--|---|
| | |
| . The complete street and mailing | g addresses of the initial designated/principal office: |
| (Stree: Address) | 111 23rd Ave S |
| , | Nampa, ID 83651 |
| (Mailing Address, if different their street address | PSS) |
| i. The name and complete street | address of the registered agent: |
| Jason Hamilton | 111 23rd Ave S |
| (Name) | (Stroct Address) |
| . The name and address of at lea company: Name | ast one member or manager of the limited liability |
| Jason Hamilton | 111 23rd Ave S |
| | |
| · | spondence (annual report notices): |
| · | |
| . Mailing address for future corres | spondence (annual report notices): 111 23rd Ave S |
| . Mailing address for future corres | spondence (annual report notices): 111 23rd Ave S ptional): er is a member, or is |
| . Mailing address for future corres Future effective date of filing (or granture of organizer(s), (An organizer | spondence (annual report notices): 111 23rd Ave S ptional): er is a member, or is |
| . Mailing address for future corres Future effective date of filing (op- gnature of organizer(s). (An organizer ling in behalt of a member or members). | spondence (annual report notices): 111 23rd Ave S ptional): ar is a member, or is Secretary of State use only |

IDAHO SECRETARY OF STATE
05/21/2012 05:00
CK: 1156 CT: 257680 BH: 1325182 - - - 1 0 180.00 = 100.00 ORGAN LLC # 3

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