

CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

2012 IANA 31 19H 12: 39

(F	(Instructions on back	k of application)	FOLE SIMO & LIMITE. GO
1.	The name of the limited liability company is:		STATE OF IDAHO
	E	BLANKENONE, LLC	
2.	The complete street and mailing ac 3865 N. JULLION WAY, BOISE, ID 8370		designated/principal office:
	(Street Address)		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	LINDA S.B. PETERMAN	3865 N. JULLION WA	AY, BOISE, ID 83704
	(Name)	(Street Address)	
	The name and address of at least one member or manager of the limited liability company:		
	Name		Address
	LINDA S.B. PETERMAN	3865 N. JULLION W.	AY, BOISE, ID 83704
	<u> </u>		
			-
5.	Mailing address for future correspo	ondence (annual repo	ort notices):
	3865 N. JULLION WAY, BOISE, ID 8370	04	
6.	Future effective date of filing (optio	nal):	· .
Sigı	nature of a manager, member o	r authorized	
pers	son.		Secretary of State use only
Siar	nature 1 6 5 00 00 00 00 00 00 00 00 00 00 00 00 0	<u>.</u>	
•	ed Name: LINDA S.B. PETERMAN		
			IDAHO SECRETARY OF STATE
Sigr	nature		01/13/2012 05:00 CK: NONE CT: 1117 BH: 1386896
Typ	ed Name:		1 & 100 00 = 100 00 CKCHW FTC # 5

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