

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 MAY -9 AM 9: 47

2. The complete street and mailing addresses of the initial designated/principal office: //6870 N. Barrymore Or Nampa, Fd 83687 (Street Address) (Mailing Address, if different than street address) 3. The name and complete street address of the registered agent: Karissa T. Wood (Name) //6870 N. Barrymore Nampa, Tcl 83687 (Street Address)
(Street Address) (Mailing Address, if different than street address) 3. The name and complete street address of the registered agent:
(Mailing Address, if different than street address) 3. The name and complete street address of the registered agent:
3. The name and complete street address of the registered agent:
Karissa T. Wood 16870 N Burrymore Nampa, Icl 83687 (Name) (Street Address)
4. The name and address of at least one member or manager of the limited liability company:
Name Address
Derect Diercks (manager) 16870 N Barnymore Or Nampa Id 85647
Dereck Diercks (manager) 16870 N Barrymore Dr Nampa Id 83687 Kavissa T Wood 16870 N Barry More Dr Nampa Id 8368
5. Mailing address for future correspondence (annual report notices):
16870 N Barrymore Or Nampa Id 83687
6. Future effective date of filing (optional):
Signature of a manager, member or authorized person.
Secretary of State use only
Signature Sancara
Typed Name: Karissa Wood
Signature
Typed Name: Diecek Dieceks IDANO SECRETARY OF STATE
CK: CASH CT: 258631 BH: 1272938

cert_org_lic Rev. 07/2010