



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2014 OCT 23 PM 2:50

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

De Rig, LLC

2. The complete street and mailing addresses of the initial designated office:

6900 W McMullen St

(Street Address)

Boise, Idaho 83709

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Lisa Derig

(Name)

6900 W McMullen St., Boise, Id 83709

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

NameAddress

Lisa Derig

6900 W McMullen St., Boise, ID 83709

5. Mailing address for future correspondence (annual report notices):

same

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name: Lisa Derig

Signature

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

10/23/2014 05:00

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