

## CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY 255408 -4 AM 8: 47

(Instructions on back of		back of application)	SECRETARY OF STATE STATE OF IDAHO	
. The nam	e of the limited liabili	ty company is:	STATE OF IDAHO	
NAM IND	OUSTRIES OF IDAHO LL	<b>C</b>		
``	plete street and maili 30 E KIMBERLY, ID 833	ng addresses of the init	tial designated office:	
	ress) H KIMBERLY, ID 83341 dress, if different than street ad-	dress)		
. The nam	e and complete stree	t address of the registe	ered agent:	
NICHOL/	AS MULBERRY		E KIMBERLY, ID 83341	
(Hame)		(Street Address)		
. The nam company		east one member or ma	anager of the limited liability	
Morro	<u>Name</u>	004	<u>Address</u> 901 POST CIRCLE KIMBERLY, ID 83341	
- NICHOL	AS MULBERRY	901 POST CIRCL	E RIMBERLY, ID 83341	
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. Mailine e	alaba a a familiation a and		on and an address and	
	H KIMBERLY, ID 83341	espondence (annual re	eport notices):	
6. Future ef	fective date of filing (	optional):		
ignature of erson.	f a manager, memb	er or authorized	<u> </u>	
,	Milu NI	11/201	Secretary of State use only	
ignature	/ (ICTUOLAS / / /	IDVII	IDAHO SECRETARY OF STATE	
yped Name	: NICHOLAS MULBERF	<u> </u>	03/04/2015 05:00	
			CK:350 CT:307205 BH:14645 10 100.00 = 100.00 ORGAN LL	
Typed Name	:			

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