

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE 2815 MAY 28 PM 1: 28

(Instructions on back of application)

| • | ions on back of application) | |
|---|---|---|
| 1. The name of the limite | d liability company is: | SECRETARY OF STATE STATE OF IDAHO |
| Consurco, LLC | | JANE OF IDAM |
| 2. The complete street and 621 E King Street, Suite 15 (Street Address) | d mailing addresses of the initia 50, Meridian, ID 83642 | al designated office: |
| · | | |
| (Mailing Address, if different than | street address) | |
| The name and complet | e street address of the registere | ed agent: |
| Derek Walz | 12641 N Humphreys | Way, Boise, ID 83714 |
| (Name) | (Street Address) | |
| company: Name Derek Walz | 621 E King Street, S | Address uite 150, Meridian, ID 83642 |
| | | |
| | | |
| 5. Mailing address for futu 621 E King Street, Suite 19 | ire correspondence (annual rep 50, Meridian, ID 83642 | ort notices): |
| - | 50, Meridian, ID 83642 | ort notices): |
| 621 E King Street, Suite 18 6. Future effective date of Signature of a manager, | filing (optional): | ort notices): |
| 621 E King Street, Suite 18 | filing (optional): | Secretary of State use only |
| 621 E King Street, Suite 18 6. Future effective date of Signature of a manager, | filing (optional): | |

CK: 6020 CT: 238327 BH: 1477323 1@ 100.00 = 100.00 ORGAN LLC #216 20.00 = 20.00 EXPEDITE C #3

W152069

Typed Name: ____

Signature _____