CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 SEP 17 AM 8: 41

(Instructions on back of application)

| (Instructions on back of application) SECRETARY (STATE OF I 1. The name of the limited liability company is: | | SECRETARY OF STATE |
|---|--|----------------------------------|
| | | STATE OF IDAFIO |
| RLK HOLDINGS, LLC | | |
| 2. The complete street and m | nailing addresses of the ir | nitial designated office: |
| 585 NORTH 2300 EAST, ST. ANTH | IONY, ID 83445 | |
| (Street Address) | | |
| (Mailing Address, if different than street | address) | |
| The name and complete st | reet address of the regis | tered agent: |
| RANDY KIRKHAM | 585 NORTH 2300 EA | AST, ST. ANTHONY, ID 83445 |
| (Name) | (Street Address) | |
| 4. The name and address of company: | at least one member or n | nanager of the limited liability |
| Name | | Address |
| RANDY KIRKHAM | 585 NORTH2300 EAS | ST, ST. ANTHONY, ID 83445 |
| SABRINA KIRKHAM | 585 NORTH 2300 EA | ST, ST. ANTHONY, ID 83445 |
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| | | |
| Mailing address for future | correspondence (annual | report notices): |
| ALLIED FINANCIAL SERVICES, PC | BOX 674 REXBURG, ID 83440 | |
| 6. Future effective date of filir | ng (optional): | |
| | | |
| Signature of a manager, meml | oer or authorized | |
| person. | | Secretary of State use only |
| Signature July For h | ush | IDANO SECRETARY OF STATE |
| Typed Name: KIRBY J. FORBUSH, CPA | | 09/17/2014 05:00 |
| | | CK:2217 CT:87111 BH:14416 |
| Signature | | 100.00 DEGAM III |
| Typed Name: | | (1) 142 7 81 |

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