



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 DEC 27 AM 11:03

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Nightrain, LLC

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

100 W. Overland Rd. Ste 204 Meridian, ID 83642

(Street Address)

(Mailing Address, if different than street address)

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

Lane Ranstrom

(Name)

100 W. Overland Rd. Ste 204 Meridian, ID 83642

(Street Address)

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

Name

Address

Lane Ranstrom

100 W. Overland Rd. Ste 204 Meridian, ID 83642

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

100 W. Overland Rd. Ste 204 Meridian, ID 83642

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____
Typed Name: Lane Ranstrom

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/27/2013 05:00
CK: 1650607 CT: 172099 BH: 1403304
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