	CERTIFICATI				FILED EFFECT	
	LIMITED LI	ABILI	ry comp	ANY	ILFED D'AN	
ET OF THE	(Instructions on back of application)		II FEB-2 AM 8:			
4	-				SECRETARY OF STA STATE OF IDAHO	
i. ine na	ame of the limited li	•	•		STATE OF IDAHO	
			nked Caldwell LLC			
2647 4	The complete street and mailing addresses of the initial designated/principal office: 2647 Adams Road Nyssa, OR 97913					
	Address) W Wainwright Dr. Ste	103 Boise, II	D 83713			
(Mailing	Address, if different than stre	et address)	· · · · · ·			
3. The na	ame and complete s	treet addr	ess of the regis	stered age	ent:	
Jennifi	er Belville		13945 W Wainy	right Dr. St	e 103 Boise, ID 83713	
(Name)		<u></u>	(Street Address)			
Zacha	ry Cleaver	· 	2647 Adams Ro	I. Nyssa, Ol	R 97913	
		<u> </u>		<u> </u>		
<u> </u>						
		·		<u> </u>	<u></u>	
5. Mailing	address for future	correspon	dence (annual	report not	tices):	
-	address for future W Wainwright Dr. Ste 1	•	•	report not	tices):	
13945	W Wainwright Dr. Ste 1	103 Boise, II	0 83713			
13945	W Wainwright Dr. Ste 1	103 Boise, II	0 83713		tices):	
<u>13945</u> 6. Future Signature	W Wainwright Dr. Ste 1	103 Boise, II ng (option	o 83713 ai):			
<u>13945</u> 6. Future Signature	W Wainwright Dr. Ste 1 effective date of fili	103 Boise, II ng (option	o 83713 ai):			
13945 6. Future Signature person. Signature_	W Wainwright Dr. Ste 1 effective date of fili of a manager, me	103 Boise, II ng (option ember or	o 83713 ai):			
13945 6. Future Signature person. Signature_	W Wainwright Dr. Ste 1 effective date of fili of a manager, me	103 Boise, II ng (option ember or	o 83713 ai):			
13945 6. Future Signature person. Signature Typed Nam	W Wainwright Dr. Ste 1 effective date of fili of a manager, me ne: Zachary Cleaver	103 Boise, II ng (option ember or	2 83713 al): authorized			
<u>13945</u> 6. Future Signature person. Signature Typed Nam	W Wainwright Dr. Ste 1 effective date of fili of a manager, me ne: Zachary Cleaver	103 Boise, II ng (option ember or	2 83713 al): authorized		Secretary of State use only	
<u>13945</u> 6. Future Signature person. Signature Typed Nam	W Wainwright Dr. Ste 1 effective date of fili of a manager, me ne: Zachary Cleaver	103 Boise, II ng (option ember or	2 83713 al): authorized		Secretary of State use only	