

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in <u>duplicate</u>.

2018 JAN -8 AM 10: 42

SECRETARY OF STATE STATE OF IDAHO

The name of the limited liabil	lity company is: STATE OF IDAHO
T Gorman Consulting, LLC	
(Remember to include the we	ords "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC
The complete street and mai	iling addresses of the principal office is:
1263 Four Mile Rd., Viola, ID	
Street Address)	
The name of the registered a	agent and the street address of the registered agent:
Thomas M. Gorman	1263 Four Mile Rd., Viola, ID 83872
Name)	(Address cannot be a post office box or postal mail box.)
The common end be about the first	
	least one governor of the limited liability company:
Thomas M. Gorman	1263 Four Mile Rd., Viola, ID 83872
Name)	(Address)
Name)	(Address)
-,	(Addices)
Vame)	(Address)
Name)	(Address)
Mailing adduce & for for	
	rrespondence (annual report notices):
1263 Four Mile Rd., Viols, ID	) 838/2
(Address)	
ture of organizer(s).	
	IT &

IDAHO SECRETARY OF STATE 01/08/2018 05:00

CK:1796 CT:350656 BH:1619848 10 100.00 = 100.00 DRGAN LLC #2

W 194512

Printed Name: -

Signature:\_\_\_\_

Printed Name: Thomas M. Gorman

Rev. 11/2015