

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

1 MAY 17 AM 9:09

SECRETARY OF STATE

	TowCo IIIC	STATE OF IDAHO
	TowCo, LLC	
The complete street and mai	illing addresses of the initial	designated/principal office:
702 N. Main Pocatello, ID 83204	•	
(Street Address)		····
PO Box 407 Hyde Park, UT 843		
(Mailing Address, if different than street a	address)	
The name and complete stre	eet address of the registered	l agent:
		- - 5
		- 02204
Jacob Brown	702 N. Main Pocatello	, ID 83201
(Name)	702 N. Main Pocatello (Street Address)	
(Name) The name and address of at company:	(Street Address)	ger of the limited liability
(Name) The name and address of at company:	(Street Address) t least one member or mana	ger of the limited liability
(Name) The name and address of at company:	(Street Address)	ger of the limited liability
(Name) The name and address of at company:	(Street Address) t least one member or mana	ger of the limited liability
(Name) The name and address of at company:	(Street Address) t least one member or mana	ger of the limited liability
(Name) The name and address of at company:	(Street Address) t least one member or mana	ger of the limited liability
(Name) The name and address of at company: Name	(Street Address) t least one member or mana	ger of the limited liability
(Name) The name and address of at company:	(Street Address) t least one member or mana	ger of the limited liability

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

PO Box 407 Hyde Park, UT 84318

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Ben Brown

Typed Name: Ben Brown

Signature ______
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE 11/17/2011 05:00 CK: 186 CT: 264239 BH: 1298494 1 2 188.08 = 100.00 ORGAN LLC # 2

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