

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 DEC 22 AM 8: 43

	(mstructions on bac	k of application)	10	DEC 22 MILL	J- 40
1. The	name of the limited liability co	mpany is:	SF	ORETHRY OF S	STATE
	DH Global, LLC		ŲL.	STATE OF IDA	1 0
2. The	The complete street and mailing addresses of the initial designated/principal office:				
	8 W. 9000 S	Victor	ID	83455	
	reet Address)				
(M	ailing Address, if different than street address)			****	
3. The	The name and complete street address of the registered agent:				
Cla	arissa S. Wells	668 W. 9000 S	Victor	ID 8345	55
(Na	ame)	(Street Address)			
	npany: Name Origon S. Wello	669 W 0000 S	Address		
CI	arissa S. Wells	668 W. 9000 S	Victor	ID 83455	
Tł	neodore P. Wells	668 W. 9000 S V	ictor, ID 834	1 55	
5. Ma	iling address for future correspo	ondence (annual rep	ort notices):		
66	8 W. 9000 S	Victor	ID	83455	
6. Fut	ure effective date of filing (optio	nal):			
•	re of organizer(s). (An organizer is behalf of a member or members).	a member, or is			
zcung in	behalf of a member of members).	0	Secreta	y of State use only	
Signatu	ire WWllaw	IIC.PMI			
•	Name: Clarissa S. Wells		TR	AUA CEPBETARY OF	CTATE
Signatu	ω ω ω	orms/LLC forms/cert_org_lic.PMD	12/ CK: 111 1 9 190.	mnu seukeiakt UF 22/2010 (7 CT: 253725 BB 00 = 100.00 OR	STRIE 1955 = 1969 1: 125286 34N LLC #
•	Name: Theodore P Wells	ormsN			

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