

FILED EFFECTIVE **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filling foo: \$100 kined \$120 not typed

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-	Complete and submit	the application in <u>duplicate</u> .	SECRETARY OF STATE	
The par	ne of the limited liabilit	v company le:	NICKAR CRADANO	
	TER ENTERPRISES	•		
PURES				
	(Remember to include the wor	rds "Limited Liability Company," "Lit	nited Company," or the abbreviations L.L.C., LLC, or LC)	
The con	nplete street and maili	ng addresses of the princi	pal office is;	
	HOMESTEAD CT, NA	· · · · · · · · · · · · · · · · · · ·		
(Street Addr	0 55)			
7790 E	HOMESTEAD CT, NA	MPA, ID 83687		
bbA gnilisM)	lress, if different)			
The ne m	no of the registered or	ant and the street edducer	• • • • • • • • • • • • • • • • • • •	
		gent and the street address	s of the registered agent:	
DEANNA FORESTER		7790 E HOMESTEAD CT, NAMPA, ID 83687		
(Name)		(Address cannot be a post office hox or postal mail (rox.)		
		east one governor of the lin	mited liability company:	
DEANNA FORESTER (Name)		7790 E HOMESTEAD CT, NAMPA, ID 83687		
		(Address)		
LORIN FORESTER		7790 E HOMESTEAD CT, NAMPA, ID 83687		
(Name)		(Address)		
		,		
(Name)		(Address)		
(Name)		(Address)		
Mailing a	address for future corr	espondence (annual repo	rt notices):	
	HOMESTEAD CT, NA	•	,	
(Addres				
nature of c	organizer(<u>s</u>).			
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ted Name	, SCOTT SMITH, AGI	ENT		
rea Manie	74			
			IDAHO SECRETARY OF STATE	
nature:			03/13/2017 05:00	
			CK: 13037490 CT: 172099 BH: 1573190	

10 100.00 = 100.00 ORGAN LLC #2 10 20.00 = 20.00 EXPEDITE C #3

Rev. 11/2015

Printed Name: -

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