



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12 MAR 12 AM 11:06

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

M. G. P. LLC

2. The complete street and mailing addresses of the initial designated office:

324 6th Ave So Nampa ID 83651

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Michael McKibben

(Name)

324 6th Ave So Nampa ID 83651

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Michael McKibben
Jeremy Green

324 6th Ave So Nampa ID 83651
7346 5th Street Nampa ID 83686

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

324 6th Ave So Nampa ID 83651

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature [Signature]

Typed Name: Michael McKibben

Signature [Signature]

Typed Name: Jeremy Green

Secretary of State use only

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03/12/2012 05:00
CK: 929415 CT: 172099 BH: 1314687
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