

1.

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed
Complete and submit the application in duplicate.

The name of the limited liability company is:

2018 JUL -3 PH - 32

SECRETARY OF STATE STATE OF IDAHO

| (venietine) to liicings the MOIds. Flighted | Liability Company," "Limited C | ompany, for the abbreviations L.L.C., LLC, or LC) |
|--|---|---|
| The complete street and mailing addres | ses of the principal offi | ce is: |
| 4242 North Brookside Lane, Boise, | Idaho, 83714 | |
| Street Address) | | |
| | | |
| Mailing Address, if different) | | |
| भारतमा ह तत्पादक , संचावित्त होस्) | | |
| , | | |
| The name and complete street address | of the registered agent | |
| The name and complete street address 4242 North Brookside Lane, Boise, | of the registered agent | |
| The name and complete street address 4242 North Brookside Lane, Boise, | _ | :: KRISTIN BAILEY |
| The name and complete street address 4242 North Brookside Lane, Boise, | ldaho, 83714 | |
| The name and complete street address 4242 North Brookside Lane, Boise, | Idaho, 83714 (Address) | KRISTIN BAILEY |
| The name and complete street address | Idaho, 83714 (Address) overnor of the limited l | KRISTIN BAILEY |

(Address)

(Address)

(Address)

Mailing address for future correspondence (annual report notices):
 4242 North Brookside Lane, Boise, Idaho, 83714

(Address)

(Name)

(Name)

(Name)

| Signature of org | anizer(s). |
|------------------|----------------|
| Printed Name: | Kristin Bailey |
| Signature: 7 | esta Dailey |

Printed Name:

Signature:

Secretary of State use only

10AHO SECRETARY OF STATE 07/03/2018 05:00

CK:19509770 CT:172099 BH:1652000 16 100.00 = 100.00 DRGAN LLC #3

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Rev. 01/2018