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CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 APR 11 PM 3:49

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Debra Gilbert LLC

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

15130 Machen Pl Caldwell, ID 83607

(Street Address)

(Mailing Address, if different than street address)

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

Debra Gilbert

(Name)

15130 Machen Pl. Caldwell, ID 83607

(Street Address)

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

Name

Address

Debra Gilbert

15130 Machen Pl. Caldwell, ID 83607

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

15130 Machen Pl. Caldwell, ID 83607

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

Signature of a manager, member or authorized person.

Signature Debra Gilbert

Typed Name: Debra Gilbert

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/11/2014 05:00
CK: 1809538 CT: 172099 BH: 1419909
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