

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Signature:

Printed Name:

Rev. 11/2015

Complete and submit the application in duplicate.

2017 DEC 11 AM 9: 24

SECRETARY OF STATE

-	iling addresses of the principal office is:
PO Box 5179 1411 E (Street Address)	Alls Ave E Ste 1002 TF ID 83301
Twin Falls, Idaho 83303	
(Malling Address, if different)	
The name of the registered	agent and street address of the registered agent:
Gary Wolverton Jr	1411 Falls Ave E Suite 1002 Twin Falls, Idaho 83301
Name)	(Address cannot be a post office box or postal mail box)
The name and address of at	least one governor of the limited liability company:
Gary Wolverton Jr.	PO Box 5179 Twin Falls, Idaho 83303
(Name)	(Audress)
(Name)	(Ardress)
Name	(Address)
	· Apparent
(Name)	(Aridress)
-	orrespondence (annual report notices):
PO Box 5179 Twin Falls, Ida (Address)	ano 83303
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ature of organizer(s).	
	Secretary of State use only
ature:	
	IDAHO SECRETARY OF STATE

CK:1324 CT:227788 BH:1615931 1@ 100.00 = 100.00 ORGAN LLC #2

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