

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

1.	The name of the limited liability company is:	
	ATRO	N LLC
2.	The complete street address, and mailing address if different, of the initial designated/ principal office:	
	1047 Caledonia, E	agle, Idaho 83616
3.	. The name of the commercial registered agent; or the name and complete street address of the non-commercial registered agent:  National Registered Agents, Inc. 1423 Tyrell Lane Boise, ID 83706 County of Ada	
4.	The name and address of at least one member or manager of the limited liability company:      Name  Address	
	Donald Miller	1047 Caledonia, Eagle, Idaho 83616
	Camille Freeman	1047 Caledonia, Eagle, Idaho 83616
	Pam Fleming	1047 Caledonia, Eagle, Idaho 83616
	Jennifer Ingraham	1047 Caledonia, Eagle, Idaho 83616
	Erica Chalkus	1047 Caledonia, Eagle, Idaho 83616
5.	i. Mailing address for future correspondence (annual report notices): c/o: 1047 Caledonia, Eagle, Idaho 83616	
6.	Future effective date of filing (optional):	
or is	nature of an organizer(s). (An organizer is a me acting in behalf of a required, and existing, initial me	
or m	nembers).	G G G G G G G G G G G G G G G G G G G
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Sig	nature	10/68/2099 05:00 — \$ CK: 380406 CT: 167623 BH: 119838
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