

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 OCT -8 PM-4:49

The name of the limited lial Evson Enterprises, LLC	bility company is:	SECRETARY OF STATE STATE OF IDAHO	
2. The complete street and ma 906 Idaho St, Gooding, ID 8333	ailing addresses of the initia	Il designated office:	
(Street Address)			
(Mailing Address, if different than street	address)	<u> </u>	
3. The name and complete str	eet address of the registere	ed agent:	
Jonathan Hocklander 906 Idaho St, Gooding		ng ID 83330	
(Name)	(Street Address)	(Street Address)	
 The name and address of a company: Name 	t least one member or man	ager of the limited liability Address	
Jonathan Hocklander	906 Idaho St, Goodii	906 Idaho St, Gooding ID 83330	
Sierra Hocklander	906 Idaho St, Goodin	906 Idaho St, Gooding ID 83330	
5. Mailing address for future co		ort notices):	
6. Future effective date of filing	ı (optional):		
Signature of a manager, men	nber or authorized		
Signature		Secretary of State use only	
Typed Name: Jonathan Hocklande	r		
Signature		IDAHO SECRETARY OF STATE 10/09/2013 05:00 CK: 118 CT: 288360 BH: 1393231	
Typed Name: Sierra Hocklander		1 0 100.00 = 100.00 ORGAN LLC # 2 1 0 20.00 = 20.00 EXPEDITE C # 3	

cert_org_lic Rev. 07/2010

W129887