



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

11 DEC 15 AM 8:45

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

DBM, LLC

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

101 Park Ave, Ste 2, Idaho Falls, ID 83402

(Street Address)

same

(Mailing Address, if different than street address)

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

Dirk Murray

(Name)

101 Park Ave, Ste 2, Idaho Falls, ID 83402

(Street Address)

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

Name

Address

Dirk Murray

101 Park Ave, Ste 2, Idaho Falls, ID 83402

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

101 Park Ave, Ste 2, Idaho Falls, ID 83402

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Dirk Murray

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/15/2011 05:00
CK: 5838 CT: 265822 DH: 1301896
1 @ 100.00 = 100.00 ORGAN LLC # 2

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