	CERTIFICATE OF LIMITED LIABILI		
Contraction of the	(Instructions on bac	k of application)	10 JUL 30 AM 8:27
1. The r	name of the limited liability co	ompany is:	SECRE " .RY OF STATE
	Ro	cky Mountain Concealed	
2. The c	complete street and mailing a	ddresses of the initial d	esignated/principal office:
	3923 E L	oma Idaho Falis Idaho 8340	01
(Stree	t Address)		
(Maili	ng Address, if different than street address)		<u> </u>
3. The r	name and complete street add	dress of the registered a	agent:
(Nam			e Idaho Falls Idaho 83401
(1901)	o)	(Street Address)	
4. The r comp	name and address of at least bany:	one member or manag	er of the limited liability
	Name	Address	
	Jeff McKenzie	3923 E Lorna Ave Idaho Falls Idaho 83401	
	Billy Casavant	4593 Hershey Loop Chubbuck Idaho 83202	
			·····
		<u> </u>	
5 Mailu	ng address for future correspo	ndence (annual report	notices) [,]
O. Ividini	• ·	na Ave Idaho Falls, Idaho 83	•
·			
6. Futur	e effective date of filing (optio	onal):	
Signature	of organizer(s). (An organizer is	a member, or is	
acting in be	ehalf of a member or members).		Secretary of State use only
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Signature		P	
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Signature	BICT		
Typed Na) pesiv	IDAHO SECRETARY OF STATE
		rcoopt to the second to the se	07/30/2010 05:00 CK: 1953 CT: 250031 BH: 1232800 1 0 100.00 = 100.00 ORGAN LLC #