CERTIFICATE OF ORGANIZATION FILED LIMITED LIABILITY COMPANY

2013 JUN -6 PM 1: 22

(Instructions on back of application) SECRETARY OF LIATE

(Name) (Street The name and address of at least one mer company: Name	of the initial designated office: he registered agent: artridge Lane Rexburg, ID 83440 Address)
The complete street and mailing addresses 517 Partridge Lane Rexburg, ID 83440 (Street Address) (Malling Address, if different than street address) The name and complete street address of Brett Kesler (Name) The name and address of at least one met company: Name Daniel Chiddix Mailing address for future correspondence 517 Partridge Lane Rexburg, ID 83440	he registered agent: artridge Lane Rexburg, ID 83440 Address) Ther or manager of the limited liability Address
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Future effective date of filing (optional): $\frac{6}{100}$	
	10/2013
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rson.	Secretary of State use only
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ped Name: Brett Kesler	
	
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ped Name:	

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