

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 JUL 20 AM 9: 08

1. The name of the limited liabi	lity company is: Chip LLC	SECRETARY OF STATE STATE OF IDAHO
2. The complete street and mail 2812 Hwy 34, Soda Springs, ID 8		ial designated office:
(Street Address) PO Box 468, Soda Springs, ID 83		
(Mailing Address, if different than street a 3. The name and complete street		red agent:
Jon Godfrey (Name)	2812 Hwy 34, Soda Springs, ID 83276 (Street Address)	
The name and address of at company:	least one member or ma	
<u>Name</u>	Address 2812 Hwy 34, Soda Springs, ID 83276	
5. Mailing address for future co	rrespondence (annual re	port notices):
PO Box 468, Soda Springs, ID 83	276	
6. Future effective date of filing	(optional):	
Signature of a manager, mem person.	ber or authorized	
_	ranco Managar I	Secretary of State use only
Signature <u>for Broff</u> Typed Name: Jon Godfrey		IDAHO SECRETARY OF STATE 07/20/2012 05:00 CK: 182 CT: 272582 BH: 1332826
Signature	<u> </u>	1 0 100.06 = 100.00 ORBAN LLC # 2
Typed Name:	!	

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