



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE**

(Instructions on back of application)

12 FEB -8 AM 8:43

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

RAMBS, LLC

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

512 East 45th Street, Boise, ID 83714

(Street Address)

P.O. Box 140554, Boise, ID 83714

(Mailing Address, if different than street address)

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

Robert S. Lee

(Name)

5223 W. Elmer St., Boise, Idaho 83703

(Street Address)

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

**Name**

**Address**

Robert S. Lee

P.O. Box 140554, Boise, ID 83714

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

P.O. Box 140554, Boise, ID 83714

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature \_\_\_\_\_

Typed Name: Robert S. Lee

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
02/08/2012 05:00  
CK: 1422 CT: 257668 BH: 1389735  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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