

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE 2015 JUN 18 PM 4: 56

(Instructions on back of application)

SECRETARY DE STATE

| . The name of the limited liability Stonebridge Ventures LLC                                       | company is: STATE OF IDAHO                               |
|--|--|
| <ol> <li>The complete street and mailing<br/>2327 N Parkforest Way</li> </ol>                      | addresses of the initial designated office:              |
| (Street Address)<br>Eagle, ID 83616  |  |
| (Mailing Address, if different than street addre   | ss)  |
| . The name and complete street a   | address of the registered agent:                         |
| Jeff Klassen   | 2327 N Parkforest Way, Eagle, ID 83616                   |
| (Name)   | (Street Address)   |
| company:<br><u>Name</u><br>Jeff Klassen  | <u>Address</u><br>2327 N Parkforest Way, Eagle, ID 83616 |
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|  |  |
| <ol> <li>Mailing address for future corres</li> <li>2327 N Parkforest Way, Eagle, ID 83</li> </ol> |  |
| 2327 N Parkiorest Way, Eagle, 1D 83  | 9010   |
| 6. Future effective date of filing (or   | ntional):  |
| o. I diale enecite date of ming (or  | Alonaly.   |
| Signature of <u>a m</u> anager, member   | r or authorized  |
| person.  |  |
| . (/O 1l-  | Secretary of State use only                              |
| Signature John Marshall  | <del></del>  |
| Typed Name: John Marshall  | IDAHO SECRETARY OF STAT                                  |
| Name at the  | 06/18/2015 05:00<br>CK:2947400 CT:172099 BH:             |
| Signature  | 16 100 00 - 100 00 00 00 00 00 00 00 00 00 00 00 00      |

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