FILED EFFECTIVE



AMENDMENT TO CERTIFICATE OF ORGANIZATION 12 APR 18 AM 9: 38 LIMITED LIABILITY COMPANY SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

| The name of the li | mited liability company is: | | |
|--|---|---------------------------------------|----------------------|
| | Carver, Bolen L | rc | |
| The name of the li | mited liability company is amend | ed to read: | |
| The harne of the ii | , , | ed to read. | |
| | Bolen, LLC | · · · · · · · · · · · · · · · · · · · | |
| The date the certif | icate of organization was original | lly filed : 2/23/201 | 2 |
| The complete stre amended to: | eet and mailing addresses of the | designated principal offi | ice is |
| The mailing addre | ss for future correspondence (an | nual reports) is amende | ed to: |
| | | | |
| The name and add <u>Name</u> Selina Carver | dress of the managers/members <u>Address</u> 2608 Bella Ave Boise, ID 83702 | Add Delete | |
| <u>Name</u> | <u>Āddress</u> | Add Delete | |
| <u>Name</u> | <u>Āddress</u> | Add Delete | llows: <u>Oth</u> |
| Name Selina Carver Signature of an au | Address 2608 Bella Ave Boise, ID 83702 thorized person. | Add Delete | Ott |

W 111343