

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014MAY -2 AM 8: 57

| 7           | (Instructions on ba  | ack of application) | ZONIAN E AN O O  |
|-------------|--|---------------------|--|
| 1.          | The name of the limited liability of Masterson Construction, LLC   | company is:         | SECRETARY OF STATE<br>STATE OF IDAHO                                       |
| 2.          | The complete street and mailing addresses of the initial designated office:  130 Cottonwood Drive, St. Maries, Idaho 83861  (Street Address) |                     |  |
|             | (Mailing Address, if different than street address   | 5)                  |  |
| 3.          | The name and complete street address of the registered agent:  |                     |  |
|             | Gale L. Masterson  |                     | Drive, St. Maries, Idaho 83861   |
|             | (Name)   | (Street Address)    |  |
| 4.          | The name and address of at least one member or manager of the limited liability company:   |                     |  |
|             | Name Cala I. Mostaran  | 420 0-14-11         | Address  |
|             | Gale L. Masterson  | 130 Cottonwood I    | Drive, St. Maries, Idaho 83861   |
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|             |  |                     |  |
| 5.          | Mailing address for future corresp<br>130 Cottonwood Drive, St. Maries, Ida  |                     | eport notices):  |
| 6.          | Future effective date of filing (opt   | ional):             |  |
| _           | nature of a manager, member son.   | or authorized       |  |
| ·           | - 11 1311 1  |                     | Secretary of State use only  |
| Sig<br>Typ  | nature Jale L. Masterson, Memb   | er                  | IDAHO SECRETARY OF STATE<br>05/02/2014 05:00<br>CK:3903 CT:9641 BH:1423051 |
| <b>C</b> :- | /  |                     | 10 100.00 = 100.00 ORGAN LLC   |
|             | natureoed Name:  |                     |  |
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9/21/2012