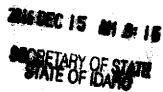


## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.



| The name of the limited liabi                            | ility company ic                                                        |                                |
|----------------------------------------------------------|-------------------------------------------------------------------------|--------------------------------|
| Torres & Sons Broker LL                                  | • • •                                                                   |                                |
|                                                          |                                                                         |                                |
| (Homember to include the v                               | words "Limited Liability Company," "Limited Company," or the abb        | reviations L.L.V., LLV, or LV) |
| The complete street and ma                               | niling addresses of the principal office is:                            |                                |
| •                                                        | Idaho Falls, Idaho 83402                                                |                                |
| Street Address)                                          |                                                                         |                                |
| Maillag Address, if different)                           |                                                                         |                                |
| The name of the registered                               | agent and the street address of the registered a                        | igent:                         |
| Rogelio Torres 8901 Blackh                               | nawk Dr. I Idaho Falls, Idaho 83402                                     |                                |
| Name)                                                    | (Address cannot be a post office box or postal mail box.                | }                              |
|                                                          |                                                                         |                                |
| The name and address of at                               | t least one governor of the limited liability compa                     | anv:                           |
| Rogelio Torres                                           | 8901 Blackhawk Dr idaho Falls, ID 83                                    | -                              |
|                                                          |                                                                         | 3-100                          |
| N31H#)                                                   | /Address                                                                |                                |
| Name)                                                    | (Address)                                                               |                                |
| ,                                                        | (Address)  (Address)                                                    |                                |
| ,                                                        |                                                                         |                                |
| Namo)                                                    |                                                                         |                                |
| Namo)                                                    | (Address)                                                               |                                |
| Name)                                                    | (Address)                                                               |                                |
| Name)<br>Name)                                           | (Address) (Address)                                                     |                                |
| Name)                                                    | (Address)                                                               |                                |
| Name)<br>Name)<br>Name;<br>Mailing address for future co | (Address)  (Address)  (Address)  orrespondence (annual report notices): |                                |
| Name) Name) Name) Mailing address for future co          | (Address)  (Address)  (Address)  orrespondence (annual report notices): |                                |
| Name) Name) Mailing address for future co                | (Address)  (Address)  (Address)  orrespondence (annual report notices): |                                |
| 6751 W Overland Dr Idaho                                 | (Address)  (Address)  (Address)  orrespondence (annual report notices): |                                |

Printed Name: Rogelia Torres

Signature:

Printed Name: -

IDAHO SECRETARY OF STATE 12/15/2016 05:00

CK:1059410240 CT:182202 BH:1559516 16 100.00 = 100.00 ORGAN LLC #2

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