

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

(Instructions on back of application)

2815 JAN 20 AM 11: 8

SEPDETATO

The name of the limited liab	ility company is:	STATE	OF IDAH
INRO, LLC	<u> </u>		
The complete street and mai	_	he initial designated office:	
1110 W. Idaho Blvd, Emmett, ID	83617		
(Street Address)			
(Mailing Address, if different than street	address)		<del></del>
The name and complete stre	et address of the re	egistered agent:	
Elysse R. Barrett	1110 W. lda	1110 W. Idaho Blvd., Emmett, ID 83617	
(Name)	(Street Addre	(Street Address)	
The name and address of at company:	least one member	or manager of the limited liability	Y
<u>Name</u>		<u>Address</u>	
Elysse R. Barrett	1110 W. Ida	1110 W. Idaho Bivd, Emmett, ID 83617	
Liberty D. Barrett	1915 W. State St, #429, Boise, ID 83702		•
Mailing address for future co	uraenandanea (ann	upl roport notices):	
1110 W. Idaho Bivd., Emmett, IE		uai report notices).	
Future effective date of filing	(optional):		
r didie ellective date of filling	(opaonai).		
nature of a manager, mem	ber or authorized	l 	
nature Elyssel B		Secretary of State use only	
ed Name: Elysse A Barrett		IDAHO SECRETARY	OF STATE
		01/20/2015	
nature		CK:2097 CT:187445	
oed Name:		16 100.00 = 100.00	ORGAN L

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