

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE 2815 APR 28 PM 3: 12

1. The name of the limited liability company is: \[\lambda \		(Instructions on back of application) SECHETARY OF STATE
2. The complete street and mailing addresses of the initial designated office: S. F. King S. (Street Address) 3. The name and complete street address of the registered agent: S. F. King S. Marridian, ID (Street Address) 4. The name and address of at least one member or manager of the limited liability company: Name B. Mailing address for future correspondence (annual report notices): S. Mailing address for future correspondence (annual report notices): S. Mailing address for future correspondence (annual report notices): S. Mailing address for future correspondence (annual report notices): Signature of a manager, member or authorized person. Secretary of State use only IDANO SECRETARY OF STATE 94/28/2015 05:00 C.K.: C.ASR CT: 303598 BH: 147311 16 100.00 = 100.00 GRGAN LLC Signature	1.	The name of the limited liability company is:
2. The complete street and mailing addresses of the initial designated office: S. F. King S. (Street Address) 3. The name and complete street address of the registered agent: S. F. King S. Marridian, ID (Street Address) 4. The name and address of at least one member or manager of the limited liability company: Name B. Mailing address for future correspondence (annual report notices): S. Mailing address for future correspondence (annual report notices): S. Mailing address for future correspondence (annual report notices): S. Mailing address for future correspondence (annual report notices): Signature of a manager, member or authorized person. Secretary of State use only IDANO SECRETARY OF STATE 94/28/2015 05:00 C.K.: C.ASR CT: 303598 BH: 147311 16 100.00 = 100.00 GRGAN LLC Signature		1 Willard and son 1-1-C
(Name) Services 1. Collock (Street Address) 4. The name and address of at least one member or manager of the limited liability company: Name Branchan D. Willard Sa E King of Medican, ID 5. Mailing address for future correspondence (annual report notices): Same as about 6. Future effective date of filing (optional): Signature Typed Name: Signature	2.	The complete street and mailing addresses of the initial designated office: 69 E Kingst. (Street Address) Web. A. and TO 83642
4. The name and address of at least one member or manager of the limited liability company: Name	3.	The name and complete street address of the registered agent:
Signature Typed Name: Signature Typed Name: Signature		(Name) Revolution Sq Eking St. meridian, ID (Street Address)
5. Mailing address for future correspondence (annual report notices): Same as about 6. Future effective date of filing (optional): Signature of a manager, member or authorized person. Secretary of State use only IDAHO SECRETARY OF STATE 04/28/2015 05:00 CK:CASH CT:309598 BH:147311 16 100.00 = 100.00 ORGAN LLC	4.	i i
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Signature Typed Name: Columbia Columb	6.	Future effective date of filing (optional):
Signature Typed Name:	-	son.
Typed Name:	-	Secretary of State use only
Signature		ed Name: 600000 0
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