



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 MAR 20 AM 9:14

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

COMP U MORE LLC

2. The complete street and mailing addresses of the initial designated office:

10255 E OLD Oregon Trail RD #14 LAVA HOT SPRINGS, ID 83246

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

DAVID MORRISON
(Name)

10255 E OLD Oregon Trail RD #14 LAVA HOT SPRINGS, ID 83246
(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

DAVID MORRISON

10255 E OLD Oregon Trail RD #14
LAVA HOT SPRINGS, ID 83246

5. Mailing address for future correspondence (annual report notices):

10255 E OLD Oregon Trail RD #14 LAVA HOT SPRINGS, ID 83246

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: DAVID MORRISON

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
03/20/2014 05:00
CK: 1746552 CT: 172099 BH: 1416388
I E 100.00 = 100.00 ORGAN LLC # 2

W135751