

Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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SECRETARY OF STATE

TOI ((Instructions on back of application)		SECKLIARY O STATE OF II				
The name of th	e limited liability com	npany is:					
	-	Coveyridge LLC					
. The complete st	reet and mailing add	dresses of the initial design	nated/principal office:				
	410 S. Orchard St	reet, Suite 108, Boise, Idaho 8	3705				
(Street Address)							
(Mailing Address, if di	fferent than street address)						
. The name and	complete street addr	ess of the registered age	nt:				
Bria	n Brady	410 S. Orchard Street,	#108, Boise, ID 83705				
(Name)		(Street Address)					
The name and a company:	address of at least or	ne member or manager o	f the limited liability				
oonipung.	Name	Ado	iress				
Joseph Dunn James Fritzsche		410 S. Orchard Street #108, Boise, ID 83705 410 S. Orchard Street #108, Boise, ID 83705 410 S. Orchard Street #108, Boise, ID 83705					
Mailing address	for future correspon	ndence (annual report not	icee):				
. maining address	· ·	rd Street #108, Boise, ID 8370	*				
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. Future effective	date of filing (option	al):	· · · · · · · · · · · · · · · · · · ·				
gnature of organiz	er(s). (An organizer is a	ı member, or is	•				
ting in behalf of a me	· · · · ·						
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