

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

SECRETARY OF STATE

| | (Instructions on back of application) | | SECRETARY OF STATE STATE OF IDAHO |
|--------------|---|---|---|
| 1. | The name of the limited liability company is: | | STATE OF TOAHO |
| | Rasmussen management LLC | | |
| 2. | The complete street and mailing add 862 Pine Brook Lane, Rexburg, ID 83440 (Street Address) | resses of the initial designate | ed office: |
| | (Mailing Address, if different than street address) | | |
| 3. | The name and complete street address of the registered agent: | | |
| | Kami Rasmussen | 862 Pine Brook Lane, Rexburg, I | D 83440 |
| | (Name) | (Street Address) | |
| | The name and address of at least one member or manager of the limited liability company: | | |
| | <u>Name</u> Kami Rasmussen | Address 962 Pine Prook Lane Poyburg III | D 82440 |
| | Nami Rasmussen | 862 Pine Brook Lane, Rexburg, li | |
| | Courtney Rasmussen | 1078 W. Stonehaven Drive, North | Tout Earle, 61 64664 |
| 5. | Mailing address for future correspond 862 Pine Brook Lane, Rexburg, ID 83440 | dence (annual report notices) |): |
| 6 | Future effective date of filing (options | a()· | |
| U | dure effective date of filling (options | ar). | |
| Sigr bers | nature of a manager, member or a | authorized | |
| | Min A Description | Secreta | ary of State use only |
| | ed Name: Kami Rasmussen | 05 CK: 6462 | HO SECRETARY OF STATE 1/18/2016 05:00 1 CT:304113 BH:152908 D = 100.00 ORGAN LLC |
| Sign | ature | | • |
| Гуре | ed Name: | V | N166774 |

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