



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 JAN 27 PM 1:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

MTB LLC

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

112 4th St, Melba ID 83641
(Street Address)

507 Dawn Ct, Kuna ID 83634
(Mailing Address, if different than street address)

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

Mary Nelson
(Name)

507 Dawn Ct, Kuna ID 83634
(Street Address)

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

Mary Nelson
Name

507 Dawn Ct, Kuna ID 83634
Address

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

507 Dawn Ct, Kuna ID 83634

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

Signature of a manager, member or authorized person.

Signature Mary L Nelson
Typed Name: Mary L. Nelson

Signature _____
Typed Name: _____

Secretary of State use only

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01/27/2015 05:00
CK:1002 CT:305677 BH:1458996
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