

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2016 JUN 15 AM 9: 32

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

SECRETARY OF STATE

Complete and s	ubmit the application in <u>duplicate</u> .	STATE OF IDAHO	
. The name of the limited JR'S FARRIER SERVICE			
(Remember to include	the words "Limited Liability Company," "Limited Comp	any," or the abbreviations L.L.C., LLC, or LC)	
The complete street and 1120 S STEVENS AVE	I mailing addresses of the principal office	e is:	
(Street Address)			
FILER, ID 83328			
(Mailing Address, if different)			
. The name of the registe	red agent and street address of the regis	stered agent:	
JORDAN R NORR	1120 S STEVENS AVE, F	1120 S STEVENS AVE, FILER, ID 83328	
(Name)	(Address cannot be a post office box o	r postal mail box)	
. The name and address	of at least one governor of the limited lia	bility company:	
JORDAN R NORR	1120 S STEVENS AVE, F	1120 S STEVENS AVE, FILER, ID 83328	
(Name)	(Address)		
(Name)	(Address)		
(Name)	(Address)		
(147110)	(Address)		
(Name)	(Address)		
. Mailing address for futur	re correspondence (annual report notice	٠/٠	
1120 S STEVENS AVE	, , , , , , , , , , , , , , , , , , , ,	5).	
(Address)			
( Marious)			
Signature of organizer(s).			
		Secretary of State use only	
Signature:		IDAHO SECRETARY OF STATE	
rinted Name: JORDAN R N	ORR	06/15/2016 05:00	
rinted Name: 200, 200, 111	<u> </u>	CK:1016 CT:325672 BH:1533347	

16 100.00 = 100.00 ORGAN LLC #2

W167967

Rev. 11/2015

Signature:

Printed Name: \_\_\_\_\_