

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 2814 OCT -2 PM 3: 13

| R | (Instructions on bac | k of application) |
|--------------|--|--|
| 1. | The name of the limited liability co | SECRETARY OF STATE mpany is: STATE OF IDAHO |
| 2 | The complete street and mailing addresses of the initial designated office: | |
| | 1775 West State Street #316, Boise, Ida | |
| | (Street Address) | |
| | (Mailing Address, if different than street address) | |
| 3. | The name and complete street address of the registered agent: | |
| | Idaho Service Company | 101 S Capitol Blvd, 10th Floor |
| | (Name) | (Street Address) Boise ID 83702 |
| | The name and address of at least one member or manager of the limited liability company: | |
| | <u>Name</u> | Address |
| | Lee Gientke | 1775 West State Street #316, Boise, Idaho, 83702 |
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| 5. | Mailing address for future correspor | ndence (annual report notices): |
| | 1775 West State Street #316, Boise, Idal | |
| 6. | Future effective date of filing (option | nal): |
| Sign pers | nature of a manager, member or | authorized |
| - | | Secretary of State use only |
| Sign | ature for M. Cinfle | |
| Гуре | ed Name: Lee Sientke | 10/02/2014 05:00 |
| Sign | ature | CK:2264108 CT:172099 BH:144376 10 100.00 = 100.00 ORGAN LLC # |
| • | ed Name: | • |
| •• | | W 142855 |