



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 JAN -9 AM 9:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Revive LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

1635 Powers Ave. Lewiston, Idaho 83501

(Street Address)

(Mailing Address, if different)

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

Stephen Kessinger

7317 Flyby Dr. Lewiston, Idaho 83501

(Name)

(Address cannot be a post office box or postal mail box)

4. The name and address of at least one governor of the limited liability company:

Kris Moore

1810 Frederickson Dr. Clarkston WA 99403

(Name)

(Address)

Stephen Kessinger

7317 Flyby Dr. Lewiston Idaho 83501

(Name)

(Address)

Lisa Smith

1635 Powers Ave. Lewiston, Idaho 83501

(Name)

(Address)

(Name)

(Address)

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

7317 Flyby Dr. Lewiston, Idaho 83501

(Address)

Signature of organizer(s).

Signature: Lisa Smith

Printed Name: Lisa Smith

Signature: Kris Moore

Printed Name: Kris Moore

Secretary of State use only

IDAHO SECRETARY OF STATE

01/09/2017 05:00

CK:164 CT:333098 BH:1562865

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