

CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY 2015 APR 16 AM 11: 28

| <u> </u> | (instructions of | n back of application) | SECRETARY OF STATE STATE OF IDAHO |
|----------------------------|--|-----------------------------------|--|
| The nan | ne of the limited liabil | ity company is: | STATE OF IDATIO |
| | OORING LLC | inty demipainty ner | |
| | | · | 7-10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 |
| | ne complete street and mailing addresses of the initial designated office: 2100 WILLOW POINTE NAMPA ID 83651 | | |
| | | ID 83651 | |
| (Street Ad- | uress) | | |
| (Mailing A | ddress, if different than street ac | ddress) | |
| 3. The nan | ne and complete stree | et address of the regi | stered agent: |
| MATT S | BULLENGER | 2100 WILLOW POINTE NAMPA ID 83651 | |
| (Name) | | (Street Address) | |
| compan | • | | & ddrace |
| | <u>Name</u> | | <u>Address</u> |
| MATT S | BULLENGER | 2100 WILLOW | POINTE NAMPA ID 83651 |
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| • | address for future cor. | • | report notices): |
| 2100 W | ILLOW POINTE NAMPA | ID 83651 | |
| | | | |
| i. Future e | effective date of filing | (optional): | |
| | , | | |
| ionature o | of a manager, memb | ber or authorized | |
| erson. | | _ | |
| | co H Colo | | Secretary of State use only |
| ignature 🖊 | Will aller | m | TOTAL ORGANIZATION OR SINCE |
| Typed Name: MATT SULLENGER | | | IDAKO SECRETARY OF ST 04/16/2015 05: |
| • 1 | | | CK:1025 CT:309095 BH: |
| Signaturo | | | 10 100.00 = 100.00 ORGA |
| Signature | | | |
| Typed Name: | | | 11/15/25 |

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