

## CERTIFICATE OF ORGANIZATION FLED EF

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(Instructions on ba	(Instructions on back of application)		4 JUN 24 PM 2: 58	
l a —.		CRETARY OF STATE		
Auto lala	V = 410	STATE OF IDAH	Û	
2. The complete street and mailing a	ddresses of the later to			
4/3/ 6/rnha	k dr Havey 10 8	office:		
	DE CI Have ID 8	3333		
(Mailing Address, If different than street address)	as a bove			
<ol> <li>The name and complete street add</li> </ol>	ress of the register-			
	are registeres agent;			
(Name) K. Ward.	2981 Barry Crack (Street Address)	Halla 14	\.	
		] ]	437	
<ol> <li>The name and address of at least o company:</li> </ol>	ne member er			
company:	me member or manager of the li	nited liability		
Name	Address	i.		
basey R. Ward	2981 Berry Cree	k Halaile	Agra	
Casey R. Ward Eric Randall	204 N 240 ST RE	The state of the		
		EVILE 10		
·				
5. Mailing address for future correspond	ence (annual report nations)			
- 4/31 Glenbrook Dr. Ha	May ID 83333			
<ol><li>Future effective date of filing (optional</li></ol>	):			
Signature of a management				
Signature of a manager, member or a person.	uthorized			
	Secretary of S	Sta ties and		
Signature		·		
Typed Name: Casey R. Ward		BECRETARY OF 37 4/2014 05:		
V / A	CK: 2002030	CT:172099 BI	H:143058	
Signature from		100.00 ORG2 20.00 EXPED		
Typed Name: FRC Kannau	1 20.00	, wa. oo marab	TABLE 19 TO	

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