

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 2814 0CT -2 AM 9: 17

1 11	(Instructions on back of application) SECECIANY OF STATE
1.	(Instructions on back of application) SECRETARY OF STATE STATE OF IDAHO The name of the limited liability company is:
	GRIDMASTERS LLC
2.	The complete street and mailing addresses of the initial designated office:
	219 SE PARK AVE
	(Street Address)
	219 SE PARK AVE (Street Address) New Plymouth, ID 83655 (Mailing Address, if different than street address)
3.	The name and complete street address of the registered agent:
	Wilken Jones JR. 219 SE PARK 4 NEW Plymouth (Name) (Street Address) IP 83455
	(Name) (Street Address) IP 83655
4.	The name and address of at least one member or manager of the limited liability company:
	Jesse W. Jones 420 SI2th STREET Payette ID
	83655
_	Mailing addraga for fiture correspondence (applied report refigee):
5.	Mailing address for future correspondence (annual report notices):
	219 SE Park ave New Plymouth ID
6.	Future effective date of filing (optional):
Sig	nature of a manager, member or authorized
	Son. Secretary of State use only
0:-	Mr. Mars de 100 a
_	nature IDAHO SECRETARY OF STATE
ıyp	med Name: Wilken Jones 10/02/2014 05:00
Qi~	CK:2038 CT:301736 BH:1443662 10 100.00 = 100.00 ORGAN LLC #
_	and Name: Tess Vines
' y ŀ	led Name. Sesse Some

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