



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE
LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 NOV 14 AM 9:51

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

LAUGHLIN RICKS ARCHITECTURE, LLC

2. The complete street and mailing addresses of the initial designated office:

935 SHOSHONE ST NORTH, TWIN FALLS, ID 83301

(Street Address)

(Mailing Address, if different than street address)

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

RUSSELL COLBY RICKS

(Name)

935 SHOSHONE ST NORTH, TWIN FALLS, ID 83301

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

RUSSELL COLBY RICKS

Address

935 SHOSHONE ST NORTH, TWIN FALLS, ID 83301

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

935 SHOSHONE ST NORTH, TWIN FALLS, ID 83301

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

R Colby Ricks

Typed Name: RUSSELL COLBY RICKS

Secretary of State use only

IDaho SECRETARY OF STATE

11/14/2014 05:00

CK:2571 CT:155242 BH:1449354
10 100.00 = 100.00 ORGAN LLC #2

Signature _____

Typed Name: _____

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