

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

2014 DEC 26 AM 9: 05

	,	\$500F	
1. The name of the limited liab	ility company is:	SECRETARIO DE STATE STATE OF IDAHO	
Crow Electric LLC		- · · · · · · · · · · · · · · · · · · ·	
2. The complete street and mai 404 Stubbs Avenue, Reubens, IC (Street Address)		nitial designated office:	
(Mailing Address, if different than street a	address)		
3. The name and complete stre	et address of the regis	tered agent:	
Scott D Crow	404 Stubbs Ave	nue, Reubens, ID 83548	
(Name)	(Street Address)	(Street Address)	
The name and address of at company:	least one member or r		
<u>Name</u> Scott Crow	404 Stubbs Aver	Address nue, Reubens, ID 83548	
Dana Crow		nue, Reubens, ID 83548	
	<del></del>		
	<del></del>		
<ol> <li>Mailing address for future cor 404 Stubbs Avenue, Reubens, ID</li> </ol>		report notices):	
6. Future effective date of filing (	(optional):		
Signature of a manager, memb	per or authorized		
		Secretary of State use only	
Signature 1			
Typed Name: Scott Crow		IDAHO SECRETARY OF STATE 12/26/2014 05:00	
O' t		CK:1334 CT:304498 BH:14544	
Signature		16 100.00 = 100.00 ORGAN LLC	
rybed Name.	ì		

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