

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 MAR 25 AM 8: 30

1. The name of the limited liability of		STATE OF IDAL	TATE
	TCD Holdings, LLC.	- ID/1	
2. The complete street and mailing 5084 E. Por	addresses of the inwerhouse Dr. Idaho Fa		office:
(Street Address)			
(Mailing Address, if different than street address	s)		
3. The name and complete street a	ddress of the regist	tered agent:	en e
Cory R. Bingham	5084 E. Pov	verhouse Dr. Idaho Falls, ID 85	1408
(Name)	(Street Address)		
The name and address of at leas company:	st one member or n	nanager of the limited liab	lity
Name	Address.		
Cory R. Bingham	5084 E. Powerhouse Dr. Idaho Falls, ID 83408		
David L. Bingham	6032 W. Bi	oadway St. Idaho Falls, ID 83	102
4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
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5. Mailing address for future corres	pondence (annual	report notices):	Agentina de la companya de la compan
5084 E. Po	werhouse Dr. Idaho F	alls, ID 83406	·
6. Future effective date of filing (op	tional):		
• • •	•		
Signature of organizer(s). (An organizer	r is a member, or is		
acting in behalf of a member or members).		Secretary of State use of	nly
Signature Coul Bridge	LE PART		
Typed Name: Cory R. Bingh	am g		
	mayon mayon	·	•
Signature		<u> </u>	
Typed Name: David L. Bingh	am amplement of the manager of the m	IDANO SECR 03/25/2(CK: 12286 CT:	