

Signature: Signature:

Printed Name:

Signature:

Rev. 08/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2016 FEB 19 PM 4: 09

Complete and submit the application in duplicate.

SECRETARY OF STATE STATE OF IDAHO

Martina K. Struck (Name) (Address) (Name) (Address) (Name) (Address) (Name) (Address) (Address) Mailing address for future correspondence (annual report notices): 5230 S. Hayseed Way, Boise, Idaho 83716 (Address) ature of organizer(s).	imber to include the words "Limited I	_rability Company." "Limited C	Company." or the abbreviations L.L.C., LLC, or LC)
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The name and complete street address of the registered agent: Martina K. Struck 5230 S. Hayseed Way, Boise, Idaho 83716 Name) (Address) The name and address of at least one governor of the limited liability company: Martina K. Struck 5230 S. Hayseed Way, Boise, Idaho 83716 Name) (Address) Name) (Address) Mailing address for future correspondence (annual report notices): 5230 S. Hayseed Way, Boise, Idaho 83716 (Address) Mailing address for future correspondence (annual report notices): 5230 S. Hayseed Way, Boise, Idaho 83716 (Address)	seed Way, Boise, Idaho	83716	
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ed Name: MARTINA K. STRUCK) IDAHO SECRETARY O	MARTINA K. S	TRUCK)	IDAHO SECRETARY OF STATE

02/22/2016 05:00 CK: 40344 CT: 320580 BH: 1514534

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