



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 FEB -2 AM 10:18

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

AirOne Equipment Rentals LLC

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

4565 E. Selfice Way, Post Falls, ID. 83854

(Street Address)

(Mailing Address, if different than street address)

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

Matthew Bumb

(Name)

840 S. Valleyview Rd. Post Falls, ID. 83854

(Street Address)

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

Name

Address

Matthew Bumb

840 S. Valleyview Rd. Post Falls, ID. 83854

George Bumb III

1590 Berryessa Rd. San Jose Ca. 95133

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

840 S. Valleyview Rd. Post Falls, ID. 83854

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

Signature of a manager, member or authorized person.

Signature

Typed Name: Matthew Bumb

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/02/2015 05:00

CK:4715 CT:192159 BH:1459704

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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