2015-JUN 23 - MM 8: 39



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY STATE OF IDAHO

The name of the limited I	liability company is:
Justin Podzimek LLC	
. The complete street and 4356 W. Meadowpine St. Me	mailing addresses of the initial designated office:
(Street Address)	
(Mailing Address, if different than st	reet address)
. The name and complete	street address of the registered agent:
Justin Podzimek	4356 W. Meadowpine St. Meridian, ID 83642
(Name)	(Street Address)
The name and address o company:	f at least one member or manager of the limited liability
<u>Name</u> Justin Podzimek	<u>Address</u> 4356 W. Meadowpine St. Meridian, ID 83642
Mailing address for future	
-	e correspondence (annual report notices):
. Mailing address for future 4356 W. Meadowpine St. Me	, , , , , , , , , , , , , , , , , , , ,
4356 W. Meadowpine St. Me	eridian, ID 83642
4356 W. Meadowpine St. Me	• • • • • • • • • • • • • • • • • • • •
4356 W. Meadowpine St. Me	ling (optional):
4356 W. Meadowpine St. Me Future effective date of fil	ling (optional):
4356 W. Meadowpine St. Me	eridian, ID 83642 ling (optional): nember or authorized IDAHO SECRETARY OF STATES
4356 W. Meadowpine St. Me 5. Future effective date of fil ignature of a manager, merson.	ling (optional): nember or authorized IDAHO SECRETARY OF STATE SECRETARY OF STATE CK: 365 CT: 311676 BH: 14
4356 W. Meadowpine St. Me Future effective date of fil	eridian, ID 83642 ling (optional): nember or authorized IDAHO SECRETARY OF STATE
4356 W. Meadowpine St. Me 5. Future effective date of fill ignature of a manager, merson. ignature of a manager, merson.	Ing (optional):
4356 W. Meadowpine St. Me 5. Future effective date of fil ignature of a manager, merson.	ling (optional): Dember or authorized IDAHO SECRETARY OF STA SAGA (ACCESSAGE BLACK) U.S. CK: 365 CT: 311676 BH: 14 16 100.00 = 100.00 DRGAN

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