

CERTIFICATE OF ORGANIZATION 2013 OCT 15 AM 9: 23 LIMITED LIABILITY COMP

SECRETARY OF STATE

FILE	(Instructions on be	ack of application)	STATE OF ICAHO
	e of the limited liability o	company is:	
	plete street and mailing RD #204, MCCALL ID 83639	addresses of the initial d	esignated office:
(Street Add	(966)		
(Mailing Ad	dress, if different than street address	8)	
3. The nam	e and complete street a	ddress of the registered	agent:
SHAWN	BRILEY	321 N 3RD #204, MC	CALL ID 83638
(Name)		(Street Address)	<u> </u>
SHAWN	BRILEY	321 N 3RD #204, MC	CALL ID 83638
5. Mailing a	ddress for future corres	pondence (annual report	notices):
			McCall ID 83638
6. Future ef	fective date of filing (opt	tional):	
Signature of person.	a manager, member	or authorized	
• ·	W. OV	1/12	Secretary of State use only
Signature	SHAVAN BOILEY	neg	
Typed Name	O MINI DIVIE		IDAHO SECRETARY OF
Cioneture			10/15/2013 e CK: 4956 CT: 239973 BH
Signature			th: 7700 tl: [377/3]

W 130148

Typed Name: