



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2013 APR 16 PM 1:50

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

GOODE PICKENS SALES AND CONSULTING LLC

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

2801 W. MOORE ST. BOISE, ID 83702  
(Street Address)

(Mailing Address, if different than street address)

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

NATHAN PICKENS  
(Name)

2801 W. MOORE ST BOISE, ID 83702  
(Street Address)

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

Name	Address
<u>NATHAN PICKENS</u>	<u>2801 W. MOORE ST BOISE, ID 83702</u>
<u>JAMIE GOODE</u>	<u>SAME</u>
_____	_____
_____	_____
_____	_____

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

SAME

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature [Signature]

Typed Name: NATHAN A PICKENS

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
04/16/2013 05:00  
CK: 1392 CT: 202019 BH: 1369744  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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