



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2014 APR 14 PM 12:33

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Lyndan, LLC.

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

12650 W. Bridger Street, Suite 100 Boise, ID 83713

(Street Address)

12650 W. Bridger Street, Suite 100 Boise, ID 83713

(Mailing Address, if different than street address)

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

Dan Hayes

(Name)

1501 Mace Rd. Eagle, ID 83616

(Street Address)

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

**Name**

**Address**

Lynette Hayes

4419 W. Holmes St. Boise, ID 83706

DAN HAYES

1501 Mace Rd. Eagle Id 83616

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

12650 W. Bridger Street, Suite 100 Boise, ID 83713

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature [Signature]

Typed Name: Dan Hayes

Signature [Signature]

Typed Name: Lynette Hayes

Secretary of State use only

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04/14/2014 05:00  
CK: 1384 CT: 233324 BH: 1420063  
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