

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 2014 DEC 22 AM 9: 14

CE & OF	(Instructions of	n back of application)	SECRETARY AT MALE
1. The na	me of the limited liabil	lity company is:	SECRETARY OF STATE STATE OF IDAHO
	ensive LLC	,	
2. The co	complete street and mailing addresses of the initial designated office:		
832 No	orth River Path Lane		_
(Street A Boise,	•		
	Address, if different than street a	ddress)	
3. The na	me and complete stree	et address of the regis	tered agent:
Levi Jo	ones	832 North River	Path Lane Boise, ID 83703
(Name)		(Street Address)	
compai	<u>Name</u>	OOO AL-JAL ID:	Address
Levi Jo	ones	832 North River	Path Lane Boise, ID 83703
	-		
 			
			
			,
			
			<u>)</u>
5 Mailing	address for future cor	respondence (annual	report notices).
	orth River Path Lane Boise.		report notices).
			
6 Future	effective date of filing	(optional)	}
J	ondonvo dato of ming	(optional):	
Signatura	of a manager member	har ar authorizad	i i
person.	of a manager, memi	ber of authorized	ł i
p 0.00m.	9//		Secretary of State use only
Signature			IDAHO SECRETARY OF STATE
Typed Name: Levi Jones			12/22/2014 05:00 CK:CASH CT:304355 BH:1453870
			10 100.00 = 100.00 DRGAN LLC
Signature_	// N.		
Typed Nam	ne. Levi Jopés		
Typou Hull	·		116

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