



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 APR -1 PM 12: 00

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

IZ Management LLC

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

1303 12th Ave S. Nampa, Idaho 83651

(Street Address)

(Mailing Address, if different than street address)

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

Stephen H. Telford

(Name)

1303 12th Ave. S., Nampa, Idaho 83651

(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>KM Livingston</u>	<u>5690 W. Broadway St. Idaho Falls, ID 83402</u>
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<u> </u>	<u> </u>

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

1303 12th Ave. S., Nampa, Idaho 83651

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature *KM Livingston*

Typed Name: KM Livingston

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/01/2014 05:00
CK: 398 CT: 273247 BH: 1418092
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