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CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

For Office Use Only

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File #: 0003727249

| fé, | | Title 30, Chapters 21 a Base Filing fee: \$100.00 | and 25, Idaho Code + \$20.00 for manual processir | ng (<u>form must be</u> | Date Filed: 1/2/2020 1:14: typed). | 00 PM 2 |
|-------|---|--|--|--------------------------|---------------------------------------|----------------------|
| 1. | The name of the limited liability company is: Watson Assets, LLC | | | | | /2020 |
| | (Remember to include the words "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC) | | | | | C) 📙 |
| 2. | The complete street and mailing addresses of the principal office is: 1525 Addison Ave East, Suite C-1, Twin Falls, Idaho 83301. | | | | | 14 |
| | P.O. Box 602,Twin Falls,Idaho 83303(the preferred mailing address). (Mailing Andress, If different) | | | | | PM Re |
| 3. | The name and complete street address of the registered agent: | | | | | Ω Φ ⊒. |
| | Timothy G. Tomlinson 355 Bracken St No, Twin Falls, Idaho 833 | | | | alls,Idaho 83301. | Ceived |
| | (Name) | | (Address) | | | y by |
| 4. | The name and address of at least one governor of the limited liability company: | | | | | 4 |
| | Timothy G. Tomlinson 355 Bracken St No, Twin Falls, Idaho 83301. | | | | <u> </u> | |
| | (Name) | | (Address) | | | Seci |
| | (Name) | | (Address) | | | etar |
| | (filame) | | (Address) | | | ν o± |
| | diane, | | (Address) | | | Ω Ω |
| 5. | Mailing address for future correspondence (annual report notices): | | | | | ě |
| | Watson Assets, LLC; c/o Timothy G. Tomlinson, P.O. Box 602, Twin Falls, Idaho 8 | | | | | 83303 [®] . |
| Sign | (Mailing | Address) ganizer(s). | | | | Jawerence |
| Prin | Printed Name: Timothy G. Tomlinson Secretary of State use only | | | | | |
| Sign | nature: | Tomoty 6. Tom | 12/27/19 | | | ∍ Denney |
| Prin: | Printed Name: | | | | | |
| Siar | nature: | | | | | |