

Signature__

Typed Name: _____

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

11 MAY 23 AM 9: 22

| | | Philips on the |
|--|--------------------------------------|--------------------------------------|
| 1. The name of the limited liability | company is: | SECRETARY OF STATE STATE OF IDAHO |
| | Paul D. Ziel, LLC | OF IDAHO |
| 2. The complete street and mailing 477 Pleasant Country Lane, Rigby, II | | designated/principal office: |
| (Street Address) P.O. Box 277 Rigby, ID 83442 (Mailing Address, if different than street addre | ecl | |
| 3. The name and complete street a | | l agent: |
| Paul D. Ziel | 477 Pleasant Country Lane, Rigby, ID | |
| (Name) | (Street Address) | |
| The name and address of at lea company: | P.O. Box 277 Rigby, 1 | Address |
| | | |
| 5. Mailing address for future corres | spondence (annual repo | rt notices): |
| F.O. Box 211 Rigby, 1D 63442 | | |
| 3. Future effective date of filing (op | otional): | |
| Signature of a manager, member person. | r or authorized | |
| D1-010 | | Secretary of State use only |
| Signature and Signature | | |
| yped Name: Paul D. Ziel | | |
| | | IDAHO SECRETARY OF STATE |

05/23/2011 05:00 CK: 7536 CT: 23363 BH: 1274838 1 9 188.60 = 199.80 ORGAN LLC # 2