



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2015 DEC 18 PM 2:46

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Treasure Valley Risk Management II LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC.)

2. The complete street and mailing addresses of the principal office is:

339 W. State Street, Suite 205, Eagle, ID 83616

(Street Address)

(Mailing Address, if different)

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

Jon D. Hill

339 W. State Street, Suite 205, Eagle, ID 83616

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Jon D. Hill

339 W. State Street, Suite 205, Eagle, ID 83616

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

339 W. State Street, Suite 205, Eagle, ID 83616

(Address)

Signature of organizer(s).

Printed Name: Jon D. Hill

Signature: [Signature]

Printed Name: _____

Signature: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

12/18/2015 05:00

CK: 3451296 CT: 172099 BH: 1504952
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