

CERTIFICATE OF ORGANIZATION DE PRECTIVE LIMITED LIABILITY COMPANY (Instructions on 1)

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WE T	(Instructions on back of application	SECRETARY OF STATE STATE OF IDAHO			
1.	The name of the limited liability company is:	STATE OF IDATO			
	Sand (Kronlustion.	5 LLC			
2.	2. The complete street and mailing addresses of the initial designated/principal office:				
	6495 W. Yavapet L)4			
	(Street Address) 4371	ろ			
	(Mailing Address, if different than street address)				
3.	3. The name and complete street address of the registered agent:				
	Saundva Sund 6495 (Name) (Street Address	w Harapet Dr.			
4.	4. The name and address of at least one member or manager of the limited liability				
	company: Name / (Address) // Address				
	Lunthea Anderuga 520	O torder Boisi 83704			
Sunder Sweet (NAS 1) PAVE MOT & 82714					
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(Will July Will	4. July US ONE 4			
	7				
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5. Mailing address for future correspondence (annual report notices): 6495 W. Arapat Dr. Boise IA 83714					
			6. Future effective date of filing (optional):		
			Signature of a manager, member or authorized		
person. //					
Secretary of State use only					
Signature					
ı yp	eu Name.				
Sia	nature	IDAHO SECRETARY OF STATE 96/10/2011 95:00			
	ed Name:	CK: 702139 CT: 172099 BH: 1277921 1 0 100.00 = 100.00 DRGAM LLC # 2			

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