

Signature;

Rev. 11/2015

Printed Name: Keith Cummins

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2018 JAN 16 AM 8: 29

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

SECRETARY OF STATE STATE OF IDAHO

Complete and submit the application in duplicate.

(Kemember to Notings the A	words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and ma	iling addresses of the principal office is:
108 Givens Rd., Kimberly, I	D 83341
(Street Address)	
P.O. Box 539, Kimberly, ID	83341
(Mailing Address, if different)	
The name of the registered	agent and street address of the registered agent:
Sharon Cummins	108 Givens Rd., Kimberly, ID 83341
(Name)	(Address cannot be a post office box or postal mail box)
The name and address of at	least one governor of the limited liability company:
Sharon Cummins	108 Givens Rd., Kimberly, ID 83341
(Name)	(Address)
Keith Cummins	108 Givens Rd., Kimberly, ID 83341
	(Address)
(Name)	
(Name)	
(Name)	(Address)
Name) (Name)	(Address)
(Name) (Name) Mailing address for future co	(Address) (Address) orrespondence (annual report notices):
Name) (Name)	(Address) (Address) orrespondence (annual report notices):
(Name) (Name) Mailing address for future co	(Address) (Address) orrespondence (annual report notices):
Name) (Name) Mailing address for future co	(Address) (Address) orrespondence (annual report notices):

CK:16165564 CT:172099 BH:1621315 10:100.00 = 100.08 DRGAN LLC #2 10:20.00 = 20.00 EXPEDITE C #3

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