



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 OCT 29 PM 12: 32

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

CTL, LLC

2. The complete street and mailing addresses of the initial designated office:

4476 N. Elgin Way Boise ID 83713
(Street Address)

(Mailing Address, if different than street address)

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

Diana Mysinger
(Name)

4476 N. Elgin Way Boise ID 83713
(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Diana Mysinger

Address

4476 N. Elgin Way Boise ID 83713

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

4476 N. Elgin Way Boise ID 83713

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Diana Mysinger

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

10/29/2014 05:00

CK:2323060 CT:172099 BH:1447226

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