



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2015 APR 16 AM 9:09

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

DOCRE2 LLC

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

4052 W Quail Hill Ct

(Street Address)

Boise, Idaho 83703

(Mailing Address, if different than street address)

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

David Hassinger

(Name)

4052 W Quail Hill Ct, Boise Idaho 83703

(Street Address)

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

NameAddress

David Hassinger

4052 W Quail Hill Ct, Boise Idaho 83703

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

4052 W Quail Hill Ct, Boise Idaho 83703

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: David Hassinger

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/16/2015 05:00

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