

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 NOV 10 AM 9: 38

SECRETARY OF STATE

1.	I. The name of the limited liability company is: CM ROBBINS LLC			
2.	The complete street and mailing addresses of the initial designated office: 2528 YELLOWSTONE TRAIL (Street Address) BURLEY, ID 83318 (Mailing Address, if different than street address)			
3.	The name and complete street address of the registered agent:			
	CHRISTOPHER ROBBINS (Name)	2528 YELLOWSTONE 1 (Street Address)	FRAIL, BURLEY, ID 83318	
4.	The name and address of at leas company:			
	CHRISTOPHER ROBBINS	2528 YELLOWSTONE T	RAIL, BURLEY, ID 83318	
5.	Mailing address for future correspondence (annual report notices): 文字文字YELLOWSTONE TRAIL, BURLEY, ID 83318			
6.	Future effective date of filing (opti	ional):		
	nature of a manager, member of son.	or authorized		
Typ Sigi	nature <u>Christopher</u> Rolled Name: <u>Christopher</u> Rolled Name: ed Name:	10 10	Secretary of State use only IDAHO SECRETARY OF STATE 11/10/2014 05:00 C:2360 CT:300550 BH:1448704 100.00 = 100.00 ORGAN LLC #2 20.00 = 20.00 EXPEDITE C #3	

cert_org_llc Rev. 07/2010

9/21/2012