



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 APR -2 AM 9:56

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

ANDERSON BAUER LLC

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

4403 Alpine Boise ID 83705

(Street Address)

(Mailing Address, if different than street address)

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

Deb Anderson

(Name)

4403 Alpine Boise Id 83705

(Street Address)

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

Name

Address

Mike Bauer

10621 W Glen ELLYN Boise 83713

Deb Anderson

4403 Alpine Boise 83705

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

4403 Alpine Boise ID 83705

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

Signature of a manager, member or authorized person.

Signature [Signature]

Typed Name: Michael S Bauer

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/02/2014 05:00
CK: 1045 CT: 295106 BH: 1418100
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W 136103