

Signature:

## AMENDMENT TO CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2017 JAN -3 AM 10: 31

SECRETARY OF STATE STATE OF IDAHO

Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$30.00.

Complete and submit the application in duplicate.

	The name of t	he limited liability comp ctures LLC	oany is:		
2.	The date the	ne date the certificate of organization was originally filed : 03/10/2016			
3.	The name of t	he limited liability comp ctures LLC	pany is amended to	o:	
4.	The complete street and mailing addresses of the principal office is amended to:  140 North Corner Street, Idaho Falls, ID 83402  (Street Address)  3990 Laura Circle, Ammon, ID 83406				
					(Mailing Address lit different)
	5.	The mailing address for future correspondence (annual reports) is amended to: 3990 Laura Circle, Ammon, ID 83406			
	(Address)				
	(Address)				
	The name and	_	_	ll be amended as follows: et. Apt. #10 Idaho Falls. ID 83402	
		d address of the manag Jacob McCann	_	ll be amended as follows: et, Apt. #10 Idaho Falls, ID 83402	
Add	The name and	Jacob McCann	760 K Stre	•	
Add Add	The name and	Jacob McCann (Name)	760 K Stre (Address)	•	
Add	The name and : Delete:  Delete:  Delete:  Delete:  Delete:  Delete:	Jacob McCann (Name)	760 K Stre (Address) (Address)	•	