

CERTIFICATE OF ORGANIZATIONLED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 FEB 28 PM 3: 35

SECRETARY OF STATE

. The name of the limited liab	bility company is: STATE OF IDAHO
2. The complete street and ma 438 West Highland Street, Boise	ailing addresses of the initial designated office: e, Idaho 83706
(Street Address)	
(Mailing Address, if different than street	address)
. The name and complete stre	eet address of the registered agent:
Kristin Muchow	438 West Highland Street, Boise, Idaho 83706
(Name)	(Street Address)
The name and address of a company:	t least one member or manager of the limited liability
<u>Name</u>	<u>Address</u>
Kristin Muchow	438 West Highland Street, Boise, Idaho 83706
-	
Mailing address for future co	orrespondence (annual report notices):
438 West Highland Street, Boise	•
3. Future effective date of filing	ı (optional):
9	
Signature of a manager, mem	ober or authorized
erson.	
Signature	Secretary of State use only
yped Name: Kristin Muchow	
Signature	IDAHO SECRETARY OF STATE

W/3498/

Typed Name: