

251

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 APR 22 AM 9:26

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

TBI SUPERVISION, LLC

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

1070 Riverwalk Drive, Suite 200, Idaho Falls, Idaho 83402

(Street Address)

(Mailing Address, if different than street address)

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

LORIN V. WALKER

(Name)

1070 Riverwalk Drive, Suite 200, Idaho Falls, ID 83402

(Street Address)

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

Name:

LORIN V. WALKER

Address:

1070 Riverwalk Drive, Suite 200 Idaho Falls, ID 83402

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

1070 Riverwalk Drive, Suite 200 Idaho Falls, ID 83402

6. Future effective date of filing (optional):
- NA

Signature of a manager, member or authorized person.

Signature:

Typed Name: LORIN V. WALKER

Signature:

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

04/22/2014 05:00

CK:1831416 CT:172099 BH:1421380

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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