



CERTIFICATE OF ORGANIZATION

B0990-3192

For Office Use Only

12	CERTIFICATE OF ORGANIZAT		
THE	LIMITED LIABILITY COMPANY	D-4- Fil- 4- 4/0/0005 0:44:00 DM	
-	Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$100.00 + \$20.00 for manual processing (f	form must be typed)	
	base I ming lee. \$100.00 · \$20.00 for mandal processing (i	orm must be typed).	
1.	The name of the limited liability company is:	92	
	• • •	(8	
	Remember to include the words "Limited Liability Company," "Limited Company,"	mpany, "or the abbreviations L.L.C., LLC, or LC)	_
2.	The complete street and mailing addresses of the principal office is:		
	4155 N. Sorvel Place, Boise, 10 83	7o3 <u>u</u>	_
	(Street Address)	ia.	
	(Mailing Address, if different)	· · · · · · · · · · · · · · · · · · ·	
3.	The name and complete street address of the registered agent:	Ď.	
	Kyley Joina 4155 N Sorrel Place, Bo	oise 1D 8370B	
	(Name) (Address)	, ==	-
4.	The name and address of at least one governor of the limited liab	bility company: ប៉	
	Kyley Toina 4155 N. Sorrel Place,	Boise 1083703 9	
	(Name) (Address)		_
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	(Name) (Address)	0	_
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	(Name) (Address)	D.	
		w L	
	(Name) (Address)	<u>a</u>	_
5.	Mailing address for future correspondence (annual report notices	s): 5	
	4155 N. Sorrei Place, Boise, 10 83703		
	(Mailing Address)	Ω Ω	
Sign	ature of organizer(s).	<u> </u>	
Print	ted Name: Kyley Joina	Secretary of State use only	
	1/2/12/11/00	Ý	
Sign	lature: What I was	O _H	
Б.		va .	
Prin.	ted Name:	# # # # # # # # # # # # # # # # # # #	
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Revise	1 12/2018		