

Signature:\_\_\_

Printed Name: -

Rev. 11/2015

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2816 DEC 15 PM 2: 29

SECRETARY OF STATE

	lation, LLC	
(Remember to include the	e words "Limited Liability Company," "L	imited Company," or the abbreviations L.L.C., LLC, or LC
The complete street and r	nailing addresses of the princ	cipal office is:
10930 Lake Shore D	rive Nampa, ID 83686	5
Street Address)		
PO Box 487 Nampa,	ID 83653	
Vailing Address, if different)		
The name of the registere	d agent and the street addre	ss of the registered agent:
_	_	<u>-</u>
David P. Ford	10930 Lake Shore Drive, Nampa, ID 83686  (Address cannot be a post office box or postal mail box.)	
varie)	(Address <b>canno</b> t be a po	st office box or postar mail box.)
The name and address of	at least one soverner of the	limited liability company:
	at least one governor of the	•
David P. Ford	P.O. Box 487, Nampa, ID 83653	
Name)	(Address)	
Name)	(Address)	
Nama		
Name)	(Address)	
Name)	(Address)	
Mailing address for future	correspondence (annual rep	ort notices):
P.O. Box 487, Nampa, ID	83653	
(Address)		
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CK: 73885 CT: 67242 BH: 1559650 10 100.00 = 100.00 ORGAN LLC #2