

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 OCT -6 PM 3: 58

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

VID, LLC

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

51 North Broadway Street #104, Drive, Blackfoot, ID 83221

(Street Address)

(Mailing Address, if different than street address)

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

Stan Johns

(Name)

580 Bergeson Dr, Blackfoot, ID 83221

(Street Address)

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

NameAddress

Stan Johns

580 Bergeson Dr, Blackfoot, ID 83221

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

580 Bergeson Dr., Blackfoot, ID 83221

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Stan Johns

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

10/06/2015 05:00

CK:3266976 CT:172099 BH:1495353

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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