CERTIFICATE OF ORGANIZATION FILED EFFECTIV LIMITED LIABILITY COMPANY (Instructions on back of application) 2014 FEB 20 - AM- 9: 29 1. The name of the limited liability company is: D. LLC 2. The complete street and mailing addresses of the initial designated office: Archstone $I \subseteq .$ (Street Address) 50 (Mailing Address, if different than street address) The name and complete street address of the registered agent: (Name) Charlenc Brady Cell S. Archstne w 4. The name and address of at least one member or manager of the limited liability company: CMEND Cells. Archstone WI BOBE, FD Name. IMALIS 5. Mailing address for future correspondence (annual report notices): SAME as about 6. Future effective date of filing (optional): FEBRUARY 20, 20 15 Signature of a manager, member or authorized person. Secretary of State use only Signature ('MEAD AMARIS Typed Name: 12.1 Signature Typed Name: IDAHO SECRETARY OF STATE /20/2014 CT: 271561 BH: cert org lic Rev. 07/2010 109.00 DRGAN LLC 9/21/2012