

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 2015 JUN 23 AM 8: 33

(Instructions on back of application)

CEORETARY OF STATE

The name of the limited liabili	ty company is:	STATE OF IDAHO"	
The complete street and maili 7576 S 400 W Rexburg Idaho 834	_	e initial designated office:	
(Street Address)			
Same (Mailing Address, if different than street ad	dress)		
The name and complete stree		istered agent:	
Brad Quinton	7576 S 400 V	7576 S 400 W Rexburg Idaho 83440	
(Name)	(Street Address)	(Street Address)	
Name Brad Quinton	7576 S 400 V	Address 7576 S 400 W Rexburg Idaho 83440	
company:		Address	
Heather L Quinton	7576 S 400 V	7576 S 400 W Rexburg Idaho 83440	
			
Mailing address for future cor	,	al report notices):	
7576 S 400 W Rexburg Idaho 834	40		
Euturo offoativo data of filina /	ontional):		
Future effective date of filing (optional).		
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gnature of a manager, memb irson.	o o authonzed		
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ped Name: Brad Quinton		06/23/2015 05:00	
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Typed Name: Heather L Quinton