



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.

2017 DEC 21 PM 4:18

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Molina LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

596 N 1089 E, Jackson, ID 83350

(Street Address)

(Mailing Address, if different)

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

Registered Agents Inc.

784 S. Clearwater Loop STE R, Post Falls, ID 83854

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

Alvino Molina

596 N 1089 E, Jackson, ID 83350

(Name)

(Address)

David Molina

596 N 1089 E, Jackson, ID 83350

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

596 N 1089 E, Jackson, ID 83350

(Address)

Signature of organizer(s).

Signature:

Printed Name: Riley Park

Signature:

Printed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

12/21/2017 05:00

OK: PREPAID CT: 238717 BH: 1617666

1@ 100.00 = 100.00 ORGAN LLC #2

1@ 20.00 = 20.00 EXPEDITE C #3

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