CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 2013 MAY 17 PM 1: 09

	(Instructions on back of applicat	
1.	The name of the limited liability company is:	STATE OF IDAHO
	LJ ECLLS CONST. LLC	
2.	The complete street and mailing addresses of <u>\$25</u> w Sheridan Are Mam (Street Address) (Mailing Address, if different than street address)	the initial designated office:
3.	The name and complete street address of the	registered agent:
	Jeremy Eells 825 (Name) (Street Address	W Sheridan Ave Mampa ID 8
4.	The name and address of at least one member company:	or manager of the limited liability
	Jorem v Falls 825 ms	heridani. M. man Th Q2/Q4
	Jeremy Eells 825 ws Domine Eells 1911	1 Cathean II II Thazz
	Eric Kangas 1737	heridanineNampa ID 83686 1 Cathie Prooldwell ID 8366 9 Lewis La Caldwell ID 83607
5.	Mailing address for future correspondence (ann 825wSheridan Ave Mampa FD	
6.	Future effective date of filing (optional):	
Sigr	nature of a manager, member or authorized	j
•		Secretary of State use only
Sign	ed Name:	
ιyμα	SU Maille. U SEPERTY COUL	IDAHO SECRETARY OF STATE
Sign	ature	05/17/2013 05:00 CK: 1483926 CT: 172099 BH: 1374325
	ad Namo:	1 0 100.00 = 100.00 ORGAN LLC # 2

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