

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Signature:

Printed Name: ______

Rev. 11/2015

Complete and submit the application in duplicate.

2017 OCT -5 AM 9: 13

SECRETARY OF STATE STATE OF IDAHO

1860 W 81 S, Idaho Falls Street Address)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Mailing Address, if different)	
The name of the registere	ed agent and street address of the registered agent:
Marisela Aguilar	1860 W 81 S, Idaho Falls, ID 83402
Name)	(Address cannot be a post office box or postal mail box)
he name and address of	f at least one governor of the limited liability company:
Marisela Aguilar	1860 W 81 S, Idaho Falls, ID 83402
Name)	(Address)
Name)	(Address)
Name)	
Name)	(Address)
Name)	(Address)
	(
Mailing address for future	correspondence (annual report notices):
1860 W 81 S, Idaho Falls	, ID 83402
(Address)	

W190062

CK:264 CT:346609 BH:1606071 10 100.00 = 100.00 ORGAN LLC #2