



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

11 JUL 18 AM 9:49

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Relationship Assessment Services, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

1035 Lowell Drive

(Street Address)

Idaho Falls, ID 83402

(Mailing Address, if different than street address)

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

Candis L Twede

(Name)

1035 Lowell Drive Idaho Falls, ID 83402

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name
Canbri Enterprises, llc

Address

1035 Lowell Drive Idaho Falls, ID 83402

Name
KSkinner Corp

Address
638 Brookside Dr. Springville, Utah 84663

Name
Stripling, llc

Address
325 W. Ash Circle Woodland Hills, UT 84653

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

1035 Lowell Drive Idaho Falls, ID 83402

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Candis Twede

Secretary of State use only

Signature _____

Typed Name: _____

IDAHO SECRETARY OF STATE
07/18/2011 05:00
CK: 6200 CT: 225674 BH: 1262975
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