

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 JAN -3 AM 10: 45

SECRETARY OF STATE STATE OF IDAHO

W176410

| <ol> <li>The name of<br/>Jacke, LLC</li> </ol>   | of the limited liabi  | lity company is:                                       |  |
|--|---|--|--|
| •  |   | vorás Canibra Lability Conbessy, "I                    | limited Colopany," or the applications (LLC, LLC, andC)        |
| 2. The comple                                    | ete street and ma   | iling addresses of the princ                           | cipal office is:   |
| 29 Sunburs                                       | st Rd   |  |  |
| (Svem Address)                                   |   |  |  |
| Horseshoe  | Bend, ID 83629  |  |  |
| Atallag ködess                                   | (1786)  |  |  |
| 3. The name of                                   | of the registered   | agent and the street addre                             | ss of the registered agent:                                    |
| SUSAN L YOUNG 3537 N COLE RD #103 BOISE ID 83704 |   | D #103 BOISE ID 83704                                  |  |
| Name   |   | endomes careed by a year office years postol medition) |  |
| 4. The name a                                    | and address of at   | least and dovernor of the                              | limited liability company:                                     |
|  | and address of at least one governor of the limited liability company: 29 SUNBURST RD HORSESHOE BEND ID 83629 |  |  |
| JAMES SP   | KUYI  |  |  |
| vervean safor,                                   |   | ्रभागोण ५५.  |  |
|  |   |  |  |
| iiaaree)   |   | (A.Mrs.).  |  |
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|  |   |  |  |
| i <sup>s</sup> icale                             |   | (A) (1966)   |  |
|  |   |  |  |
| 54-571-67  |   | .assest  |  |
|  |   |  |  |
| 5. Mailing add                                   | lress for future co   | orrespondence (annual rep                              | ort notices):  |
| **   | LE RD #103 BOI  | ·  | ,  |
| (Address)  |   |  |  |
|  |   |  |  |
| Signature of org                                 | anizer/s)   |  |  |
| oignature of org.                                | Δ   | <del></del>  | Secretary of State use only                                    |
| Signature: <b>/</b>                              | mes Deru  | <u> </u>   |  |
| II   | AMED OFFICE   |  | IDAHO SECRETARY OF STATE                                       |
| Printed Na <b>M</b> e: <u> </u>                  | AMES SPRUY!   |  | 01/03/2017 05:00   |
|  |   |  | CK:645 CT:332909 BH:1562119<br>16 100.00 = 100.00 ORGAN LLC #2 |
| Signature:                                       |   |  | The section and the first first first                          |

Rev. 11/2015

Printed Name: -