

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 MAR -4 PM 4: 25

W81975

1.	The name of the limited liability con	npany is:		SECRETARY OF STATE STATE OF IDAHO	
		17Y, LLC			
2.	The complete street and mailing addresses of the initial designated/principal office: 1912 N. 17th Street, Boise Idaho 83702				
	(Street Address)	·			
	(Mailing Address, if different than street address)			· · · · · · · · · · · · · · · · · · ·	
3.	The name and complete street address of the registered agent:				
	Don E. Miller	1912	N. 17th Str	eet, Boise Idaho 83702	
	(Name)	(Street Address)			
4.	The name and address of at least of company:	ne member o		er of the limited liability	
		Name 1912 N. 17th S			
	Don E. Miller	1912 N. 17th Street, Boise, Idaho 83702			
	Joseph R. Grubiak	Joseph R. Grubiak 24811 Lemp L			
		-			
		<u> </u>			
5.	Mailing address for future correspond	ndence (annu th Street, Boise			
6.	Future effective date of filing (option	nal):			
	nature of organizer(s). (An organizer is a	member, or is			
acti	ng in behalf of a member or members).	_ [Secretary of State use only	
Sig	nature		M. P. P.		
Тур	ped Name: Don E. Miller		NLLC formskeart_org_Ec.PMD d 07/2008	IDAHO SECRETARY OF STATE	96
Sig	nature		M LC fo	CX: NONE CT: 2105 BH: 1159 1 0 100.00 = 100.00 ORONA L	/32 LC # 2

Typed Name: _____