



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

11 APR -1 AM 8:28

1. The name of the limited liability company is:

Restoration Station L.L.C.SECRETARY OF STATE
STATE OF IDAHO

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

5015 Brook Lane #B Chubbuck, Idaho 83202

(Street Address)

(Mailing Address, if different than street address)

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

David Ray Bickley

(Name)

4884 Suzanne Ct Chubbuck Idaho 83202

(Street Address)

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

NameAddress

David R. Bickley

4884 Suzanne Ct. Chubbuck, Idaho 83202

Nancy M. Bickley

4884 Suzanne Ct. Chubbuck, Idaho 83202

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

5015 Brook Lane #B Chubbuck ID 83202

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

Signature of a manager, member or authorized person.

Signature

Typed Name: David R. Bickley

Signature

Typed Name: Nancy M. Bickley

Secretary of State use only

IDAHO SECRETARY OF STATE
 04/01/2011 05:00
 CK: 7938 CT: 257257 DN: 1267203
 1 @ 100.00 = 100.00 ORGAN LLC # 2
 1 @ 20.00 = 20.00 EXPEDITE C # 3

W101957