



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2015 MAR -4 PM 2:06

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Level-5 Concepts LLC

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

10327 W. Capella Dr. Star, ID 83669

(Street Address)

10327 W. Capella Dr. Star, ID 83669

(Mailing Address, if different than street address)

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

Daniel Strauss

(Name)

10327 W. Capella Dr. Star, ID 83669

(Street Address)

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

Name

Address

Daniel Strauss

10327 W. Capella Dr. Star ID 83669

Jason Hawkins

10230 W. Vega Dr. Star, ID 83669

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

10327 W. Capella Dr. Star ID 83669

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Daniel Strauss

Signature _____

Typed Name: Jason Hawkins

Secretary of State use only

IDAHO SECRETARY OF STATE

03/04/2015 05:00

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