



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 JAN -3 AM 10:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Contiguity EAI LLC

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

207 N 6th St Parma, ID 83660

(Street Address)

PO Box 431 Parma, ID 83660

(Mailing Address, if different than street address)

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

Thomas Day

(Name)

207 N 6th St Parma, ID 83660

(Street Address)

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

Name

Address

Thomas Day

207 N 6th St Parma, ID 83660

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

PO Box 431 Parma, ID 83660

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Thomas L Day

Typed Name: Thomas L Day

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
01/03/2014 05:00
CK: 1650607 CT: 172099 BH: 1404183
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W/32665