



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
2014 JUN 12 AM 9:50

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

CAB Enterprises, LLC

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

475 Amy Lane, Idaho Falls, Idaho 83406

(Street Address)

(Mailing Address, if different than street address)

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

Chris S Hayes

(Name)

890 Oxford Drive, Idaho Falls, Idaho 83401

(Street Address)

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

Name

Address

Chad Burnell

475 Amy Lane, Idaho Falls, Idaho 83406

Andrea Burnell

475 Amy Lane, Idaho Falls, Idaho 83406

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

Hayes Management Services, 890 Oxford Drive, Idaho Falls, Idaho 83401

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

Signature of a manager, member or authorized person.

Signature

Chad Burnell

Typed Name: Chad Burnell

Signature

A Burnell

Typed Name: Andrea Burnell

Secretary of State use only

IDAHO SECRETARY OF STATE

06/12/2014 05:00

CK: 8359 CT: 104250 BH: 1428945

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