



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2012 DEC 27 AM 11:35

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

OP Partners, LLC

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

106 Nth 6th, Suite M-2

(Street Address)

Boise, ID 83702

(Mailing Address, if different than street address)

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

Clay Carley

(Name)

106 Nth 6th, Suite M-2, Boise, ID 83702

(Street Address)

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

Name

Address

Clay Carley

106 Nth 6th, Suite M-2, Boise, ID 83702

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

106 Nth 6th, Suite M-2, Boise, ID 83702

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name:

Signature

Typed Name:

Secretary of State use only

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12/27/2012 05:00  
CK: 1234820 CT: 172099 BH: 1353097  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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