



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 AUG -1 AM 8:56

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

MICHAEL BOLLER, LLC

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

69 MILWAUKEE ROAD, ST. MARIES, IDAHO 83861

(Street Address)

(Mailing Address, if different than street address)

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

MICHAEL BOLLER

(Name)

645 CANYONVIEW ROAD, ST. MARIES, ID 83861

(Street Address)

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

Name

Address

MICHAEL BOLLER

645 CANYONVIEW ROAD, ST. MARIES, ID 83861

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

69 MILWAUKEE ROAD, ST. MARIES, IDAHO 83861

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: MICHAEL BOLLER

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
08/01/2013 05:00
CK: 2060 CT: 82199 BH: 1304362
1 @ 100.00 = 100.00 ORGAN LLC # 2

W127785