



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

11 FEB 10 AM 8:16

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:  
Summit Solutions, LLC

2. The complete street and mailing addresses of the initial designated/principal office:  
9030 W. Duck Lake Dr., Boise, ID 83714  
(Street Address)  
P.O. Box 1571, Boise, ID 83701  
(Mailing Address if different than street address)

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

Mark Kuzio  
(Name)

9030 W. Duck Lake Dr., Boise, ID 83714  
(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Treat Beattie</u>	<u>P.O. Box 1571, Boise, ID 83701</u>
<u>Mark Kuzio</u>	<u>P.O. Box 1571, Boise, ID 83701</u>
_____	_____
_____	_____
_____	_____

5. Mailing address for future correspondence (annual report notices):  
P.O. Box 1571, Boise, ID 83701

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of organizer(s) (An organizer is a member, or it acting on behalf of a member or members).

Secretary of State use only

Signature: *Gary D. Luke*  
Typed Name: Gary D. Luke  
Capacity: Attorney

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_  
Capacity: \_\_\_\_\_

W100445