



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 JUL 10 PM 4:10

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Treefort LLC

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

1605 N 13TH ST SUITE A, BOISE, ID 83702

(Street Address)

(Mailing Address, if different than street address)

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

Lori Shandro

(Name)

1605 N 13TH ST SUITE A, BOISE, ID 83702

(Street Address)

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

Name

Address

Lori Shandro

1605 N 13TH ST SUITE A, BOISE, ID 83702

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

1605 N 13TH ST SUITE A, BOISE, ID 83702

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Lori Shandro

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

07/10/2014 05:00

CK:1096 CT:292343 BH:1432712

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