

Signature__ Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY08

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CERTIFICATE OF C	~
(Instructions on back	of application)
The name of the limited liability com	npany is:
N	Mr. Dust Recovery, L. L. C.
The complete street address, and m principal office:	ailing address if different, of the initial destinast/
17 12th Avenue Sou	uth, Suite 200, Nampa, Idaho, 83651
address of the non-commercial regis	red agent; or the name and complete streets stered agent: Patrick Davidson 17 12th Avenue S. Ste \$400 \(\lambda \) Klampa, Idaho 83651
The name and address of at least on	ne member or manager of the limited liability
company:	
RGD Inc	<u>Address</u> 17 12th Ave S, Ste 200, Nampa, Id, 83651
Mitch Fairweather	1121 S Middleton Rd, Nampa, Id, 83686
Randy Ott	2426 Ona St, Boise, Id, 83705
	7.20 7.10 44, 20100, 10, 00700
Mailing address for future correspond 17 12th Avenue Sout	dence (annual report notices): th, Suite 200, Nampa, Idaho, 83651
Future effective date of filing (optional	al):
nature of an organizer(s). (An organizer is acting in behalf of a required, and existing, in	is a member, nitial member
nature Patrick & Davids	Secretary of State use only
ped Name: Patrick Davidson	
nature	IDAHO SECRETARY OF STATE 07/15/2008 05:00 CK: 1896 CT: 227855 PH: 112788 1 8 188.88 ORGAN LLC

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