



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2014 OCT -6 AM 9:41

1. The name of the limited liability company is:

I Prop-It, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

435 Shady Pines Loop, Priest Lake, ID 83856

(Street Address)

(Mailing Address, if different than street address)

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

Brad Gagnon

435 Shady Pines Loop, Priest Lake, ID 83856

(Name)

(Street Address)

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

Name

Address

Brad Gagnon

435 Shady Pines Loop, Priest Lake, ID 83856

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

435 Shady Pines Loop, Priest Lake, ID 83856

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Brad Gagnon

Typed Name: Brad Gagnon

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

10/06/2014 05:00

CK:5876 CT:301863 BH:1444091
10 100.00 = 100.00 ORGAN LLC #2

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