FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 NOV 19 AM 11:33

1.	The name of the limited liability company is:		STATE OF IDAHO	
	BI	ue Sky Supply,LLC	ж*.	
2.	The complete street and mailing addresses of the initial designated/principal office: 150 South Adkins Way, Suite 140, Meridian Idaho 83642			
	(Street Address) same			
_	(Mailing Address, if different than street address)	'		
3.	The name and complete street address of the registered agent:			
	Dee Anna C. Coleman (Name)	150 S. Adkins Way, Suit	e 140, Meridian Idaho 83642	
4.	The name and address of at least one member or manager of the limited liability company:			
	<u>Name</u>	<u>Address</u>		
	Dee Anna C. Coleman	150 S. Adkins Way, Suit	e 140, Meridian Idaho 83642	

5.	Mailing address for future correspondence (annual report notices):			
	150 South Adkins Way, Suite 140, Meridia	ın Idaho 83642		
6.	Future effective date of filing (optional	al):		
Sigi	nature of a/manager, member or	authorized		
pers				
~			Secretary of State use only	
	nature had been been been been been been been bee			
Тур	ed Name: Dee Anna C. Coleman IDANO SECRETO	NRY OF STATE	IDAHO SECRETARY OF STATE	
	11/17/20 CK: 2392 CT: 252	938 BH: 1247469	4474079010 ND:00	
_	nature 1 8 25.06 = 25.1	00 ORGAN LLC # 4	CK: CASH CT: 252930 BH: 1247892 1 B 75.00 = 75.00 ORGAN LLC # 2	
Тур	ed Name:		W 98118	
			NJYONO	

cert_org_lic Rev. 07/2010