

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 MAR -6 AM 8: 31

SECRETARY OF STATE

·	STATE OF IDAHO"
1. The name of the limited lial	· "··
401 N. Arthur LLC	
4839 Whitaker Rd. Chubbuck, I	ailing addresses of the initial designated office:
(Street Address)	
(Mailing Address, if different than stree	t address)
3. The name and complete str	eet address of the registered agent:
Jared Keller	4839 Whitaker Rd. Chubbuck, ID 83202
(Name)	(Street Address)
The name and address of a company:	at least one member or manager of the limited liability
Name	Address
Chris Robinson	2425 Shayla Place Pocatello, ID 83201
5. Mailing address for future of	orrespondence (annual report notices):
4839 Whitaker Rd. Chubbuck,	ID 83202
6. Future effective date of filin	g (optional):
	·
Signature of a manager, me	mber or authorized
person.	Secretary of State use only
Signature 11 V	Coolodary of Grate and Gray
Signature Jared Keller	IDAHO SECRETARY OF STATE
Typed Name: Sared Keller	03/06/2015 05:00
	CK:314 CT:307328 BH:1464932
Signature	1@ 100.00 = 100.00 ORGAN LLC #3

W148790

Typed Name: _____