

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 DEC 11 PM 2: 37
SECRETARY OF STATE
STATE OF IDAHO

Samuel Control	(mail delibition of back (	or application)	STATE OF IDAHO	
1. Th	e name of the limited liability com	pany is:	-5/1/0	
H	log Pen Openers, LLC			
3 (S B	e complete street and mailing add 888 East Wormwood Ct street Address) Boise, ID 83716 Mailing Address, if different than street address)	resses of the initial designated	d office:	
3. Th	e name and complete street addre	ame and complete street address of the registered agent:		
	Charles P. Adams	3888 East Wormwood Ct, Boise, II	D 83716	
4)	Name)	(Street Address)		
4. The name and address of at least one member or manager of the limited liability company:				
	<u>Name</u>	<u>Address</u>		
C	Charles P. Adams	3888 East Wormwood Ct, Boise, II	D 83716	
_				
	ailing address for future correspond 888 East Wormwood Ct, Boise, ID 83716			
6. Fu	ture effective date of filing (optiona	al):		
Signat persor	ture of a manager, member or			
Signat	ure Charles Paden	Secretar	y of State use only	
Typed	Name: Charles P. Adams			
Signat	ure	12/	OAHO SECRETARY OF STATE	
Typed	Name:	CK: 278	1 CT: 181175 BH: 1350949 .00 = 100.00 ORGAN LLC # 2	

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