

Printed Name:

Signature:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed
Complete and submit the application in duplicate.

FILED EFFECTIVE

2018 SEP 13 PM 1:39

SECRETARY OF STATE STATE OF IDAHO

1. The name of the limited liability company is:

| (Remember to include the w | ords "Limited Liability Company," "Limit | ed Company, "or the abbreviations L.L.C., LLC, or LC) |
|--|---|--|
| The complete street and mailing addresses of the principal office is: 1413 North 6th Street Apt #4, Payette, ID 83661 | | |
| (Street Address) | - manusas yellik kun | |
| (Mailing Address. if different) | | |
| The name and complete stree | t address of the registered a | gent: |
| James McElroy | 1413 North 6th Street Apt #4, Payette, ID 83661 | |
| (Name) | (Address) | |
| The name and address of at lo | - | ed liability company: Street Apt #4, Payette, ID 83661 |
| (Name) | (Address) | Street Apt #4, 1 ayette, 10 03001 |
| | | |
| (Name) | (Address) | |
| | | |
| (Name) | (Address) | |
| | | |
| (Name) | (Address) | |
| Mailing address for future corr | respondence (annual report r | notices): |
| 1413 North 6th Street Apt # | 74, Payette, ID 83661 | |
| (Address) | | |
| ature of organizer(s). | | |
| ed Name: JAMES MECIROY | | Secretary of State use only of State |
| SO HAMES MISE | (F-OY | 09/13/2018 05:00 CK:CASH CT:363436 BH:1664068 |
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