

CERTIFICATE OF ORGANIZATION FILED LIMITED LIABILITY COMPANY 2013 OCT 31 AM 9: 16 (Instructions on back of application) 1. The name of the limited liability company is: Codeland lire 2. The complete street and mailing addresses of the initial designated office: Fruitland, ID 83619 (Mailing Address, if different than street address) The name and complete street address of the registered agent: 4. The name and address of at least one member or manager of the limited liability company: 5. Mailing address for future correspondence (annual report notices): or Frutland, 20 83619

6. Future effective date of filing (optional):

Signature of a manager, member or authorized

person.

Secretary of State use only

Signature Typed Name

Signature

Typed Name:

IDAHO SECRETARY OF STATE

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