



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2013 OCT -1 AM 9:02

1. The name of the limited liability company is:

Tower Insurance Brokers llc

SECRETARY OF STATE  
STATE OF IDAHO

2. The complete street and mailing addresses of the initial designated office:

789 Barnwood Dr Ammon ID 83406

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Brad Blackham

(Name)

789 Barnwood Dr Ammon ID 83406

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Brad Blackham

789 Barnwood Dr Ammon ID 83406

5. Mailing address for future correspondence (annual report notices):

789 Barnwood Dr Ammon ID 83406

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name:

Brad Blackham

Secretary of State use only

Signature

Typed Name:

IDAHO SECRETARY OF STATE  
10/01/2013 05:00  
CK: 1013 CT: 208134 BH: 1392288  
1 @ 100.00 = 100.00 ORGAN LLC # 2