

Signature:____

Rev. 11/2015

Printed Name: _____

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code
Filing fee: \$100 typed, \$120 not typed
Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 JUN 14 PH 4: 12

SECRETARY OF STATE STATE OF IDAHO

1@ 100.00 = 100.00 ORGAN LLC #2

(Remember to include th	e words "Limited Liability Company," "Limited Company," or the aboveviations L.E.C., LLC, or LC;
The complete street and m	nailing addresses of the principal office is:
2698 E. 3700 N., Twin Fal	ls, ID 83301
(Suget Alloress)	
Mailing Address, it different;	
The name of the registered	d agent and street address of the registered agent:
Preston Flanary	2698 E. 3700 N., Twin Falls, ID 83301
Neutre)	(Address cannot be a post office box or postal moli box)
The name and address of	at least one governor of the limited liability company:
Preston Flanary	2698 E. 3700 N., Twin Falls, ID 83301
Name)	(Address)
•	
Name)	(Accress)
	,
Name)	(Address)
	•
(Yartifa)	(Address)
.4.10	
**	correspondence (annual report notices):
2698 E. 3700 N., Twin Fall	IS, ID 63301
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ture of organizer(s).	Secretary of State use only