

Printed Name:

Rev. 11/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2017 JUL -5 AM 10: 46

	Complete and sub	mit the application in <u>duplicate</u> .	SECRETARY OF STATE OF IDAHO
1.	The name of the limited lia	bility company is:	
	TETON PHARMS, LLC		·
	(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)		
2,	The complete street and m	nailing addresses of the principal o	office is:
	2470 JAFER CT. IDAHO	FALLS, ID 83404	
	(Street Address)		
	(Mailing Address, If different)		· · · · · · · · · · · · · · · · · · ·
3.	The name of the registered agent and street address of the registered agent:		
	JASON BAILEY	2470 JAFER CT. IDAHO FALLS, ID 83404	
	(Name)	(Address cannot be a post office box or postal mail box)	
4.	The name and address of at least one governor of the limited liability company:		
	JASON BAILEY	2470 JAFER CT. IDAHO FALLS, ID 83404	
	(Name)	(Address)	
	(Name)	(Address)	
	(Name)	(Address)	
		, ,	
	(Name)	(Áddress)	
5.	Malling address for future correspondence (annual report notices):		
	2470 JAFER CT. IDAHO FALLS, ID 83404		
	(Address)		
Qia.	antura of organización		
_	nature of organizer(s).		Secretary of State use only
Sígr	nature:		IDAKO SECRETARY OF STATE
Dula	ted Name ASON BAILEY		06/21/2017 05:00
-11J)	ted Name: JASON BAILEY		K:13695490 CT:172099 BH:1590034 @ 100.00 = 100.00 ORGAN LLC #2
Siar	nature:		"
~ .0'			IDAHO SECRETARY OF STATE

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07/05/2017 05:00

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