



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2014 JUL -7 AM 9:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Maze Adventures LLC

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

3130 N. Yellowstone Hwy, Idaho Falls, Idaho 83401

(Street Address)

(Mailing Address, if different than street address)

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

Jaren Layton

(Name)

3099 Pinnacle Drive Idaho Falls, Idaho 83401

(Street Address)

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

Name

Address

Jaren Layton

3099 Pinnacle Drive, Idaho Falls, Idaho 83401

Troy Mortensen

214 Water Tower Circle, Albion, Idaho 83311

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

3130 N. Yellowstone Hwy, Idaho Falls, Idaho 83401

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

Typed Name: Jaren Layton

Signature _____

Typed Name: _____

Secretary of State use only
IDAHO SECRETARY OF STATE
07/07/2014 05:00
CK:CASH CT:298714 BH:1432124
1@ 100.00 = 100.00 ORGAN LLC #2

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