

1.

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

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

The name of the limited liability company is:

Signature: Harain Mallinez

Printed Name:

Rev. 11/2015

Horacio Martinez

Complete and submit the application in <u>duplicate</u>.

2017 JUL 24 PM 1: 22

SECRETARY OF STATE STATE OF IDAHO

W186662

| (Remember to include the | words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC) |
|---------------------------------|--|
| ' | ailing addresses of the principal office is: |
| 16500 N Profit Cir 201, Nar | mpa Idaho 83687 |
| (Street Address) | |
| (Mailing Address, if different) | |
| The name of the registered | agent and the street address of the registered agent: |
| Adriana Linares | 16500 N Profit Cir 201, Nampa ID 83687 |
| (Name) | (Address cannot be a post office box or postal mail box.) |
| The name and address of a | t least one governor of the limited liability company: |
| Adriana Linares | 16500 N Profit Cir 201, Nampa ID 83687 |
| (Name) | (Address) |
| Horacio Martinez | 965 W Kimra St, Meridian ID 83642 |
| (Name) | (Address) |
| (Name) | |
| (voite) | (Address) |
| (Name) | (Address) |
| | |
| Mailing address for future of | orrespondence (annual report notices): |
| 16500 N Profit Cir 201, Nar | mpa ID 83687 |
| (Address) | |
| ature of organizer(s) | , |
| ature of organizer(s) | Secretary of State use only |
| ature: | IDAHO SECRETARY OF STATE |
| ed Name: Adriana Linares | 07/24/2017 05:00 |
| ad Namo. Auffalia Linafes | CK:CASH CT:343087 BH:159493: |