

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2016 DEC 22 AM 9: 12

FILED EFFECTIVE

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

SECRETARY OF STATE STATE OF IDAHO

Complete and submit the application in duplicate.

1. The name of the limited liability company is:

	LLS ID 83401
Mailing Address, if different)	
The name of the registered age	nt and the street address of the registered agent:
JENNIFER MCCULLOCH	237 6TH ST IDAHO FALLS ID 83401
Name)	(Address cannot be a post office box or postal mail box.)
The name and address of at lea	st one governor of the limited liability company:
JENNIFER MCCULLOCH	237 6TH ST IDAHO FALLS ID 83401
Name)	(Address)
Name)	(Address)
Name)	(Address)
Name)	(Address)
•	spondence (annual report notices):

Printed Name: JENNIFER MCCULLOCH

Signature: __

Printed Name: -

12/22/2016 05:00

CK:1889 CT:332573 BH:1560604 10 100.00 = 100.00 ORGAN LLC #2

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