

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on back	eers Consulting, LLC
1.	The name of the limited liability cor	mpany is:
	Sweers Consulting, LLC	
2.	The complete street and mailing addresses of the initial designated office: 2463 Highway 30 Soda Springs, ID 83276 (Street Address)	
	(Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	Mary Sweers	2463 Highway 30 Soda Springs, ID 83276
	(Name)	(Street Address)
4.	The name and address of at least one member or manager of the limited liability company:	
	Name	Address
	Leslie R Sweers III	2463 Highway 30 Soda Springs, ID 83276
	Mary K Sweers	2463 Highway 30 Soda Springs, ID 83276
5.	Mailing address for future correspondence (annual report notices):	
	2463 Highway 30 Soda Springs, ID 83276	
6.	6. Future effective date of filing (optional):	
	nature of a manager, member or son.	authorized
•		Secretary of State use only
_	nature Lile R Succes The	
Typ	ped Name: Leslie R Sweers III	

IDAHO SECRETARY OF STATE **96/22/2012 95:00** CK: 5433 CT: 271785 BH: 1329422 1 8 180.00 = 180.00 ORGAN LLC # 2

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Signature_

Typed Name: Mary K Sweers