	CERTIFICATE O			
	LIMITED LIABI	LITY COMPAN	2014 APR -1 PM 3: 33	
ALT TOTAL	(Instructions on back of application)		SECRETARY OF STATE STATE OF IDAHO	
1. The n	ame of the limited liability	company is:	STATE OF IDAHO	
Peab	ody Optical , LLC			
409 \$	omplete street and mailing S. 8th St., Ste. 101, Boise, Idaho Address)		designated office:	
(Mailin	g Address, if different than street addre	ess)		
3. The n	ame and complete street a	address of the registered	d agent:	
Math	ew Petersen	409 S. 8th St., Ste. 10	01, Boise, Idaho 83702	
(Name	)	(Street Address)		
comp			one member or manager of the limited liability <u>Address</u> 409 S. 8th St., Ste. 101, Boise, Idaho 83702	
	g address for future corres 5. 8th St., Ste. 101, Boise, Idah	• • • •	rt notices):	
6. Future	e effective date of filing (or	otional):		
Signature person.	e of a manager, membe	r)or authorized	Security of State upp only	
Signature	(DD)	2	Secretary of State use only	
Typed Na				
Signature Typed Na	me:		IDAHO SECRETARY OF STATE 04/01/2014 05:00 CK: 1001 CT: 295100 BH: 141814 1 0 100.00 = 100.00 Organ LLC #	
2012		cert_org_lic Rev. 07/2010	W136190	