

1.

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed Complete and submit the application in duplicate.

The name of the limited liability company is:

2016 OCT 24 AM 10: 12

SECRETARY OF STATE STATE OF IDAHO

| LIVOS USA, LLC                            |  |
|---|--|
| (Remember to i                            | nclude the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC |
| The complete street<br>855 E 480 S Driggs | t and mailing addresses of the principal office is:<br>, ID 83422  |
| (Street Address) PO Box 947 Driggs        | , ID 83422   |
| (Mailing Address, if different)           |  |
| The name of the rec                       | gistered agent and street address of the registered agent:   |
| Grace Olerud 855 E                        | E 480 S Driggs, If   |
| (Name)                                    | (Address cannot be a post office box or postal mail box)   |
| The name and addr<br>Grace Olerud 855 E   | ess of at least one governor of the limited liability company:   |
| (Name)                                    | (Address)  |
| Glen Olerud 855 E                         | 480 S Driggs, ID   |
| (Name)                                    | (Address)  |

5. Mailing address for future correspondence (annual report notices): PO Box 947 Driggs, ID 83422

(Address)

(Address)

(Address)

(Name)

(Name)

| (Address)       |                  |       |
|-----------------|------------------|-------|
| Signature of or | ganizer(s).      | aller |
| Signature:      | Mal              | Eller |
| Printed Name:   | /<br>Grace Oleru | d     |
| Signature:      |                  |       |
| Printed Name:   |                  |       |
| Rev. 11/2015    |                  |       |

Secretary of State use only

IDAHO SECRETARY OF STATE 10/24/2016 05:00

CK: 6523 CT: 83471 BH: 1552149 10 100.00 = 100.00 ORGAN LLC #2

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