

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 SEP 20 PH 1: 07

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability com	npany is:
	The Peregrine Group, LLC	
2.	The complete street and mailing addresses of the initial designated office: 8660 W. Atwater Drive, Garaden City, ID 83714	
	(Street Address) P.O. Box 140013, Garden City, ID 83714 (Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	Michael L. Falconer	8660 W. Atwater Dr., Garden City, ID 83714
	(Name)	(Street Address)
4.	The name and address of at least one member or manager of the limited liability company:	
	<u>Name</u>	Address
	Michael L. Falconer	8660 W. Atwater Dr., Garden City, ID 83714
		·

5.	Mailing address for future correspondence (annual report notices):	
	The Peregrine Group, LLC, P.O. Box 1400	013, Garden City, ID 83714
6.	Future effective date of filing (option	al):
_	nature of a manager, member or	authorized
pers	son.	Secretary of State use only
Sigr	nature Milla Lefallitus	
Тур	ed Name: Michael L. Falconer	
Sigr	nature	IDAHO SECRETARY OF STATE 99/20/2013 05:00 CK: 1555742 CT: 172899 BH: 1398886
Typed Name:		1 8 100.00 = 100.00 ORGAN LLC # 2

W129428