



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 APR 26 PM 12:06

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

~~SPRINGER~~ KSON LLC

2. The complete street and mailing addresses of the initial designated office:

617 S 13th ST #416

(Street Address)

Boise, Idaho 83702

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Travis Sanders

(Name)

617 S 13th ST #416

(Street Address)

Boise Id 83702

4. The name and address of at least one member or manager of the limited liability company:

Name

Travis Sanders

Address

617 S 13th ST #416

Boise Id 83702

5. Mailing address for future correspondence (annual report notices):

617 S 13th ST #416 Boise Id 83702

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Travis Sanders

Typed Name: Travis Sanders

Signature _____

Typed Name: _____

Secretary of State use only

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04/26/2013 05:00
CK: 1376199 CT: 172099 BH: 1371379
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