



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

10 AUG -6 AM 8: 34

1. The name of the limited liability company is:

Skyflower LLC

SECRETARY OF STATE
STATE OF IDAHO

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

50 East Wallace Ave. Driggs, Idaho 83422

(Street Address)

(Mailing Address, if different than street address)

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

Brett Cooke

(Name)

50 East Wallace Ave. Driggs, Idaho 83422

(Street Address)

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

Name

Address

Nancy Bush

3648 N 2800 E Twin Falls, Idaho 83301

Gary Phillips

3648 N 2800 E Twin Falls, Idaho 83301

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

50 East Wallace Ave. Driggs, Idaho 83422

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Gary Phillips

Signature _____

Typed Name: Nancy Bush

Secretary of State use only

IDAHO SECRETARY OF STATE
08/06/2010 05:00
CK: 1490 CT: 250208 BH: 1233697
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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