

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 09 DEC 28 AM 9: 04

(Instructions on back of application)

ACCOUNTY OF STATE

	DECIMENTAL OF ONCE
1. The name of the limited liability company is:	STATE OF IDAHO
Shear necessitu 1	LLC
2. The complete street and mailing addresses of the	he initial designated/principal office:
1 3160 g, 17th Street Suite 140	
WIMM Address UNO FIED I	1 9341Y_
(Mailing Address, if different than street address)	4.02108
3. The name and complete street address of the re	egistered agent:
Trank C. Carrad	(10=0 15 10=N
(Name) (Street Address	4153 E 105N
	TOUGH TOUT
The name and address of at least one member company:	or manager of the limited liability 340C
A. Name	Address
Chanotte Seward 4	153 E 105N IDAHO
FRANK G Sewaen "	" FALLS
· ·	
5. Mailing address for future correspondence (annu	ual report notices):
3160 & 17th Street	Stute # 140
	ON ID 8340G
Future effective date of filing (optional):	
	· * a company
Signature of organizer(s). (An organizer is a member, or is	
acting in behalf of a member or members).	Secretary of State use only
Signature Yam Solwala	Para Marian
Typed Narke: Frank G.Seward	IDAHO SECRETARY OF STATE 12/29/2009 65:00 CK: 6222 CT: 243375 BH: 1280919 1 0 100.00 ORGAN LLC N 2 1 0 20 00 = 100.00 ORGAN LLC N 2
	IDAHO SECRETARY OF STATE
Signature	12/29/2009 05:00 CK: 6222 CT: 243375 BH: 1286919
Typed Name:	1 0 100.80 = 100.00 ORGAN (LC N 2