



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 DEC 27 AM 11: 57

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Clay & Samantha Esplin Management LLC

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

1303 12th Ave. S., Nampa, Idaho 83651

(Street Address)

(Mailing Address, if different than street address)

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

Stephen H. Telford

(Name)

1303 12th Ave. S., Nampa, Idaho 83651

(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Clay Esplin</u>	<u>5199 Daisy Ln, Pocatello, ID 83204</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

1303 12th Ave. S., Nampa, Idaho 83651

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Clay Esplin, Manager

Signature _____

Typed Name: Samantha Esplin, Manager

Secretary of State use only

IDAHO SECRETARY OF STATE
12/27/2013 05:00
CK: 307 CT: 273247 DN: 1403339
1 @ 100.00 = 100.00 ORGAN LLC # 2

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