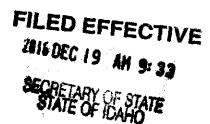


CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

The name of the limited liability company is: WILSON RENTALS CCT. LLC



| Sweet Address) | |
|----------------------------------|--|
| Mailing Accress. if different) | |
| The name of the registered age | nt and street address of the registered agent: |
| PATRICIA GAY WILSON | 24447 S. WHALEN RD, ST. MARIES, ID. 83861-1001 |
| vame) | (Address connet be a post office box or postal mail box) |
| he name and address of at lea | ast one governor of the limited liability company: |
| PATRICIA GAY WILSON | 24447 S. WHALEN RD, ST. MARIES, ID. 83861-1001 |
| Vaine) | (Address) |
| RANDY L. WILSON | 24447 S. WHALEN RD, ST. MARIES, ID. 83861-1001 |
| vlame) | (Address) |
| Name) | (Address) |
| Name) | (Address) |
| Mailing address for future corre | spondence (annual report notices): |
| 24447 S. WHALEN RD, ST. MA | |

Signature: Latrura

Printed Name: PATRICIA GAY WILSON

Rev. 11/2015

Printed Name: RANDY L. WILSON

Secretary of State use only

IDAHO SECRETARY OF STATE 12/19/2016 05:00

CK:151 CT:332423 BH:1560017 16 100.00 = 100.00 ORGAN LLC #2

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