



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2015 FEB 19 AM 8:35

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Chasers DD, LLC

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

335 Butterfly Dr.

(Street Address)

Idaho Falls, ID 83401

(Mailing Address, if different than street address)

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

Cherokee Bates

(Name)

335 Butterfly Dr., Idaho Falls, ID 83401

(Street Address)

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

Name

Address

Cherokee Bates

335 Butterfly Dr., Idaho Falls, ID 83401

Charlotte Baker

3475 Ross Ave., Ammon, ID 83406

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

335 Butterfly Dr., Idaho Falls, ID 83401

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Cherokee Bates

Signature

Typed Name: Charlotte Baker

Secretary of State use only

IDAHO SECRETARY OF STATE

02/19/2015 05:00

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