



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 JUN 11 AM 8:50

1. The name of the limited liability company is:

EMERGENCY SURVIVOR, LLC

SECRETARY OF STATE
STATE OF IDAHO

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

2340 POCATELLO CREEK RD, POCATELLO ID 83201

(Street Address)

(Mailing Address, if different than street address)

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

ALICIA HANSEN

(Name)

2340 POCATELLO CREEK RD, POCATELLO 83201

(Street Address)

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

Name

ALICIA HANSEN

Address

2340 POCATELLO CREEK RD, POCATELLO ID 83201

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

2340 POCATELLO CREEK RD, POCATELLO ID 83201

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: MEL DARTON CPA

Signature

Typed Name:

Secretary of State use only

W 94118

IDAHO SECRETARY OF STATE

06/11/2010 05:00
CK: 2588 CT: 246627 BH: 1226306
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