FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION

ZOIZ DEUSI FIT 4-10

LIMITED LIABILITY COI (Instructions on back of applica	
1. The name of the limited liability company is:	
Double Trouble LLC.	
2. The complete street and mailing addresses of the initial designated office:	
(Street Address)	
(Malling Address, Il different than street address)	
The name and complete street address of the registered agent:	
(Nome) Street Address	Bills ave Garden City 1d 83714
 The name and address of at least one member or manager of the limited liability company: 	
() \ ()	Address
Claudius Cantway 3070	S. Gullay Ave
5015e, ID 83709	
Christine Kowaman 4213 Ray St. Spl	
Garde	n City, JO 83714
5. Malling address for future correspondence (annual report notices):	
302 Bills ave, Gorden City ID 83714	
6. Future effective date of filing (optional): December 31,0010	
Signature of a manager, member or authorized person.	
Signature Wand F. Carran Jan	Secretary of State use only
Typed Name: Maudine F. Carraway	
	IDAHO SECRETARY OF STATE
Signature Christine L Bowman	12/31/2012 05:00 CK: 1240022 CT: 172099 BH: 1353617 1 0 100.00 = 100.00 ORGAN I C # 2
The state of the s	1 # 180.80 = 180.90 ORGAN LLC # 2

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