

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY NOV 20 AM 8: 30

(Instructions on back of application) CERRETARY OF STATE

(	STATE OF IDAHO
1. The name of the limited liability company	y is:
WAL	DONE, LLC
2. The complete street and mailing address	ses of the initial designated/principal office:
808 Cheney Dr.	. Twin Falls, Id. 83301
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street address of	of the registered agent:
Hyong Pak	601 Addison Ave. Twin Falls, Id. 83301
(Name) (Str	eet Address)
<ol> <li>The name and address of at least one m company:</li> </ol> Name	ember or manager of the limited liability  Address
Tim Wangler	808 Cheney Dr. Twin Falls, Id. 83301
5. Mailing address for future correspondence	ce (annual report notices):
•	. Twin Falls, Id. 83301
6. Future effective date of filing (optional):	
J (1 / 2	
Signature of organizer(s). (An organizer is a mem	her oris
acting in behalf of a member of members).	
luh -	Secretary of State use only
Signature	
Typed Name: Tim Wangler	IDAHO SECRETARY OF STATE  1 /20/2008 05:00  CK: 6152 CT: 231613 BH: 1145245  1 00.00 = 100.00 ORGAN JULY #
	2009 2009 2009
Signature	IDAHO SECRETARY OF STATE  11/20/2008 05:00
Typed Name Jason Newhouse	CK: 6152 CT: 231613 BH: 1145245 1 P 100.00 = 100.00 ORGAN LIC #

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