FILED EFFECTIVE

 (Street Address) 4. The name and address of at least one member or company: Name 	e initial designated office: isterèd agent: st Blvd STE 106A Coeur dAlene ID 83814
Logistic Solutions LLC 2. The complete street and mailing addresses of the 1900 Northwest Blvd STE 106A Coeur dAlene ID 83814 (Street Address) PO Box 3371 Hayward, CA 94540 (Mailing Address. If different than street address) 3. The name and complete street address of the reg REGISTERED AGENTS INC. (Name) (Street Address) 4. The name and address of at least one member or company: Name	istered agent: at Blvd STE 106A Coeur dAlene ID 83814 manager of the limited liability Address
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(Name) (Street Address) 4. The name and address of at least one member or company: Name	manager of the limited liability
Name	Address
5. Mailing address for future correspondence (annual 1900 Northwest Blvd STE 106A Coeur dAlene ID 83814	report notices):
5. Future effective date of filing (optional):	
ignature of a manager, member or authorized	
ignature	Secretary of State use only
gnature	IDAHO SECRETARY OF STATE 05/15/2015 05:00
/ped Name:	CK:1119 CT:305893 BH:1475 1@ 100.00 = 100.00 ORGAN LI

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