



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 JAN 19 AM 9:28

**SECRETARY OF STATE
STATE OF IDAHO**

1. The name of the limited liability company is:

Blood LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC.)

2. The complete street and mailing addresses of the principal office is:

629 E. Lake Creek St.

(Street Address)

Meridian ID 83642

(Mailing Address, if different)

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

Jennifer Blood

629 E. Lake Creek St. Meridian, Id 83642

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

Jennifer Blood

629 E. Lake Creek St. Meridian ID 83642

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

629 E. Lake Creek St. Meridian ID 83642

(Address)

Signature of organizer(s).

Signature: _____

Printed Name: **Jennifer Blood**

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

01/19/2017 05:00

CK: 6132 CT: 333542 BH: 1564772

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