

CERTIFICATE OF ORGANIZATION

2015 ADD

(Instructions on ba		back of application)	SECHE AND OF STATE
1. The name	e of the limited liabilit	y company is:	OWNE OF IDAHO
Fortiori G	sames LLC		
•	th St, Idaho Falls, ID 8340	ng addresses of the initia	al designated office:
	dress, if different than street add	iress)	
3. The nam	e and complete stree	t address of the register	ed agent:
Renaldo	Harper	370 E 16th St Idaho	Falls, ID 83404
(Name)		(Street Address)	
Summer	Howard	3597 Colborne Driv	e, Dayton, OH 45430
•	iddress for future corn oth St, Idaho Falls, ID 8340	espondence (annual rep 04	port notices):
6. Future et	ffective date of filing (optional):	
•	f a manager, memb	er or authorized	
person.	u 101		Secretary of State use only
Signature 🥢	12 Harry		IDAHO SECRETARY OF STA
Typed Name	Mark Howard		04/13/2015 05:0
<u>.</u>	Ruffer Office		CK:1019 CT:308885 BH:1 16 100.00 = 100.00 ORGAN
Signature 🖊	יו ממממות ע של עול	1	

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