



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 SEP 29 PM 2: 08

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Arctic Unlimited, LLC

2. The complete street and mailing addresses of the initial designated office:

2173 Arctic Ave.

(Street Address)

Idaho Falls, Idaho 83404

(Mailing Address, if different than street address)

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

InCorp Services, Inc.

(Name)

1524 S. Vista Ave, Ste 12, Boise, ID 83705

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name	Address
Faye Powell	2173 Arctic Ave. Idaho Falls, Idaho 83404

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

2173 Arctic Ave. Idaho Falls, ID 83404

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Faye Powell 9/24/14

Typed Name: Faye Powell

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

09/29/2014 05:00

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