

Printed Name:

Signature:

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

**FILED EFFECTIVE** 

Title 30, Chapters 21 and 25, Idaho Code

Base Filing fee: \$100.00 typed, \$120 not typed

Complete and submit the application in duplicate.

2018 APR -4 AM 9: 27

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complete and subm	at the appropriate in gaproute,
The name of the limited liability	company is: SECRETARY OF STATE  STATE OF IDAHO
Omniform Solutions, LLC	Omnitorm Solutions, LLC
	CAMMINION SOLUTIONS, CCC
The complete street and mailin	on addresses of the principal office is:
330 Maple Avenue Middleto	n, Idaho 83644
The name and complete street	address of the registered agent:
Jacob N Wilkins	330 Maple Avenue Middleton, Idaho 83644
The name and address of at le	ast one governor of the limited liability company:
Jacob N Wilkins	330 Maple Avenue Middleton, Idaho 83644
Mailing address for future corre	espondence (annual report notices):
330 Maple Avenue Middleto	on. Idaho 83644
ature of organizer(s).	
ed Name: Jake Wilkins	Secretary of State use only
ted Name:	1DAHO SECRETARY OF STATE 04/04/2018 05:00
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