



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 JUN -9 AM 9:56

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

CL Ventures, LLC

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

5582 E. Stageline Drive, Boise, ID 83713

(Street Address)

(Mailing Address, if different than street address)

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


David W. Hockman

(Name)

1458 S. Blue Jay Place, Eagle, ID 83616

(Street Address)

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

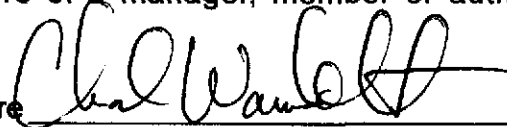
Name	Address
Chad Wambolt	5582 E. Stageline Drive, Boise, ID 83713 ⁶

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

5582 E. Stageline Drive, Boise, ID 83713⁶

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

Signature of a manager, member or authorized person.

Signature 

Typed Name: Chad Wambolt

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

06/09/2014 05:00

CK:596 CT:285051 BH:1428309

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