



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

12 FEB -8 PM 3:21

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

PSB, LLC

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

2615 S Swallowtail Ln Boise ID 83706
(Street Address)

(Mailing Address, if different than street address)

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

Paul Basom
(Name)

2615 S Swallowtail Ln Boise ID 83706
(Street Address)

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

Name

Address

Paul Basom

2615 S Swallowtail Ln Boise ID 83706

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

2615 S Swallowtail Ln Boise ID 83706

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

Signature of a manager, member or authorized person.

Signature Paul R. Basom

Typed Name: Paul Basom

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/08/2012 05:00
CK: 1739 CT: 181254 BH: 1389818
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