



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 MAR -3 PM 12: 53

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Koehler Group, LLC

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

2564 N Capecod Way Meridian Id 83646

(Street Address)

PO Box 1004 Middleton Id 83644

(Mailing Address, if different than street address)

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

William S. Koehler

(Name)

2564 N Capecod Way Meridian Id 83646

(Street Address)

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

Name

Address

William S. Koehler

2564 N Capecod Way Meridian Id 83646

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

PO Box 1004 Middleton Id 83644

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature _____

Typed Name: William S. Koehler

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
03/03/2009 03:00
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