

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 JAN 30 AM B: 50

| 1. The name of the limited liability company is: | SEQRETARY OF |
|---|---|
| The Juniper br | oup LLC STATE OF IDA |
| 2. The complete street and mailing addresses of 1859 Bench 2d Vale (Street Address) | the initial designated/principal office: |
| (Mailing Address, if different than street address) | |
| 3. The name and complete street address of the r | |
| Bruce Peterson 240 (Name) (Street Addre | |
| The name and address of at least one member company: | or manager of the limited liability |
| Merle Rempel 185 | Address 9 Bench 2d. Vale, OR 97918 |
| | |
| | |
| | ,, |
| 5. Mailing address for future correspondence (ann <u>50 Merle Rempel 1859 Bench</u> | ual report notices): 2d. Vale, 02 979/8 |
| 6. Future effective date of filing (optional): | |
| Signature of a manager, member or authorized person. | |
| Signature Mule Lempel Typed Name: Merle Rempel | Secretary of State use only |
| Typed Name: ///erle Rempel | |
| Signature | IDAHO SECRETARY OF STATE 01/30/2013 05:00 CK: 1438 CT: 278777 BH: 1357941 |
| Typed Name: | 1 0 100.00 = 100.00 ORGAN LLC # 2 |

cert_org_lic Rev. 07/2010

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