FILED EFFECTIVE

254



AMENDMENT TO CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 APR 10 PM 4: 12

SECRETARY OF STATE STATE OF IDAHO

(Instructions on back of application)

(*****	The state of the s			
The name of the lin	nited liability company is:			
	DeARMOND INSURANCE, L	LC		
The name of the lin	nited liability company is amended to r	ead:		
The date the certific	cate of organization was originally filed	i :	12/2/20	005
The complete stree amended to:	at and mailing addresses of the design	ated pri	ncipal o	ffice is
1693 S. Spr:	ing Valley Ln., Ste 200, Me	ridia	n, ID	83642
The mailing addres	s for future correspondence (annual re	eports) is	samend	led to:
	1693 S. Spring Valley Ln., Ste. 200, Meric	•		
Name Brent DeArmond Alda DeArmond	Address 4241 N Edelweiss St Boise ID 83713 4241 N Edelweiss St Boise ID 83713	Add	Delete	Address Change
Signature of an auth	prized person.			
gnature BRENT DeARMOND		Secretary of State use only		
oed Name				
gnature ped Name	1	IDAHO SECRETARY OF STATE 04/10/2015 05:00 CK:2743644 CT:172099 BH:147 16 30.00 = 30.00 ORGAN AMEN		
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