

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 2014 AUG 15 PM 4: 22

اللاشفا	(Instructions on t	back of application)	SECRETARY OF STATE
1. The nam	e of the limited liability	company is:	STATE OF IDAHO
	n Co., LLC		
			1. 1. 1. 1. EP.
	plete street and mailing	-	tial designated office:
	/atoosi Lane, Nampa, ID 836	653 	
(Street Add P.O. Box	ress) (487, Nampa, ID 83653		
	ldress, if different than street addre	966)	
3. The nam	e and complete street a	address of the registe	ered agent:
David Ford		10930 Watoosi Lane, Nampa, ID 83653	
(Name)		(Street Address)	
Beth Ann		10930 Watoosi Lane, Nampa, ID 83653	
Beth Ann	<u>Name</u> n Ford	<u>Address</u> 10930 Watoosi Lane, Nampa, ID 83653	
David Ford		10930 Watoosi Lane, Nampa, ID 83653	
			
			
C Marilian -	addina a fam faktiva a anna		anort national:
-	address for future corres x 487, Nampa, Idaho 83653	•	eport nouces).
P.U. B03	(407, Ivanipa, Idano 03033		
6 Future of	ffective date of filing (o	ntional):	
o. i utale e	nective date of filling (of	puonal).	
Cianatura a	fo monager mamba	r or outborized	
person.	f a manager, membe	1 or authorized 1 ,	
po.00	3/11/1	/14 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Secretary of State use only
Signature	My CT		***************************************
Typed Name	Kimbell D. Gourley, Inco	orporator	IDAHO SECRETARY OF STATE 08/15/2014 05:00
	_/		CK:70380 CT:67242 BH:14375
Signature		<u> </u>	16 100.00 = 100.00 ORGAN LLC
Typed Name);		V. IV. II n. a.a.

WI41233