

251



CERTIFICATE OF ORGANIZATION

LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 APR 22 AM 10:54

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

M.T.R. LLC

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

1108 N. Echolaw K WY. Eagle ID. 83616
(Street Address)

(Mailing Address, if different than street address)

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

Bryan Miller
(Name)1108 N. Echolaw K WY. Eagle ID.
(Street Address) 83616

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

Name

Address

Juanna Alexander1108 N. Echolaw K WY.Eagle ID. 83616

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

1108 N. Echolaw K WY. Eagle ID 83616

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

Signature of a manager, member or authorized person.

Signature

Bryan Miller

Typed Name:

BRYAN MILLER

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/23/2013 05:00
CK: 1371170 CT: 172099 BH: 1370756
1 @ 100.00 = 100.00 ORGAN LLC # 2

W124558