

CERTIFICATE OF ORGANIZATIONILED EFFECTIVE

LIMITED LIABILITY COMPANY 7817 FEB -3 FN 3: 35

	(Instructions on back of ap	DEUNLIANT OF STRIE		
1.	The name of the limited liability company	v is:		
	• , •	imons LLC		
2.	2. The complete street and mailing addresses of the initial designated office:			
	1969 W Divide Creek Street, Meridian, ID 83646			
	(Street Address) 1969 W Divide Creek Street, Meridian, ID 83646			
	(Mailing Address, if different than street address)	10		
3.	3. The name and complete street address of the registered agent:			
	Jerusha Goodwin 1969	9 W Divide Creek Street, Merklan, ID 83646		
	(Name) (Stre	eet Address)		
4.	4. The name and address of at least one member or manager of the limited liability company:			
	Nama	Address		
	Jerusha Goodwin 196	9 W Divide Creek Street, Meridian, ID 83646		
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5. Mailing address for future correspondence (annual report notices):				
	-	St Meridian ID 83646		
6.	Future effective date of filing (optional): _			
_	nature of a manager, member or auth	norized -		
per	son.	Secretary of State use only		
Sig.	nature Audin			
_	ed Name Jerusha Goodwin			
Sig	nature			
Тур	ed Name:	IDAHO SECRETARY OF STATE		
		02/03/2012 05:00 CK: 895824 CT: 172899 BH: 138918		

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