

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED

(Instructions on back of application)

1. The name of the limited liability cor	mpany is: 2013 DEC 30 AM 9: 08
Jacana LLC	SECHETARY OF STATE
2. The complete street and mailing ad	dresses of the initial designated office () () () () () () () () () () () () ()
(Street Address) (Mailing Address, if different than street address)	- Laurio Hais, 10 63904
3. The name and complete street addr	ress of the registered agent:
Laura Pennock (Name)	2648 5 Higher Ave, Idahofalls, ID, 83404 (Street Address)
The name and address of at least o company:	ne member or manager of the limited liability
Name	Address
Michael Pennock	2648 S Highee Ave, IdanoFalls ID, 83404
LAURA Pennock	11 11
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5. Mailing address for future correspon	dence (annual roport notices).
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2648	Higbee Ave, Idaho Falls, ID 83404
6. Future effective date of filing (options	al): January 1, 2014
Signature of a manager, member or person.	authorized
Signature Samer Secund	Secretary of State use only
Typed Name: Laura Pennock	
Signature Michael Permore	M135613
Typed Name: Michael Pennock	IDAHO SECRETARY OF STATE 12/30/2013 05:00
	CK: 1886 CT: 291861 RH: 1483418 1 8 188.88 - 188.88 ORGAN LLC # 2