PILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY LIMITED LIABILITY COMPANY PM 4: 03

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

	O INTE OF TOARD
1. The name of the limited liability co	empany is:
	DE-10-2, LLC
2. The complete street and mailing ac	ddresses of the initial designated/principal office:
	842 E. Winding Creek
(Street Address)	Eagle, ID 83616
(Mailing Address, if different than street address)	Lagie, ID 65616
3. The name and complete street add	dress of the registered agent:
Wade D. Thomas	842 E. Winding Creek, Eagle, ID 83616
(Name)	(Street Address)
The name and address of at least company:	one member or manager of the limited liability
Name	<u>Address</u>
Dynamîs Energy, LLC	842 E. Winding Creek, Eagle, ID 83616
5. Mailing address for future correspo	andence (annual report notices):
	nding Creek, Eagle, ID 83616
O'TE hav 111	Training Orbert, Lagre, 10 GGO 10
6. Future effective date of filing (option	nal):
or victor and and an ining (option	
Signature of organizar(a) (As assessed	a secondaria de la companya della companya della companya de la companya della co
Signature of organizer(s). (An organizer is acting in behalf of a member or members).	
total in behalf of a thember of membersy.	Secretary of State use only
Signature	D. PMI
Typed Name: Wade D. Thomas	
	199 Page 199
Signature	Norpformstuc Formsheet org. In: PMD Revised 07/2006
	with the state of
Typed Name:	Sorpital Re
	IDAHO SECRETARY OF STATE

IDAHO SECRETARY OF STATE 07/06/2010 05:00 CK: 470173 CT: 172099 BH: 1229297 1 9 100.00 = 100.00 ORGAN LLC #