CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY	
(Instructions on back of application	on) 2015FEB -9 AM 9: 32
1. The name of the limited liability company is: SECRETARY OF STATE STATE OF IDAHO	
 2. The complete street and mailing addresses of the initial designated office: 625 1st East St. Rivie ID 83443 (Street Address) <u>P-0_Box 305 Rivie ID 83443</u> (Mailing Address, if different than street address) 3. The name and complete street address of the registered agent: 	
(Name) Witche 10796 N 42 E Vcon ID 83757 (Name)	
4. The name and address of at least one member or manager of the limited liability company: Name Address Kevin Wiese 625 1st East St. Rige ID83443	
5. Mailing address for future correspondence (annual report notices): P.O. Box 305 Rine ID 83443	
6. Future effective date of filing (optional); Signature of a manager, member or authorized person.	
•	Secretary of State use only
Signature Kevin Wiese	IDAHO SECRETARY OF STATE 02/09/2015 05:00 CK:1081 CT:306180 BH:1460894 10 100.00 = 100.00 ORGAN LLC #2
Signature	16 ID0.00 - ID0.00 UKGAN 1110 #2
Typed Name:	W147514

ret no in Rev 07/2010

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