



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code  
Base Filing fee: \$100.00 typed, \$120 not typed

Complete and submit the application in duplicate.

For Office Use Only  
**-FILED-**  
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1. The name of the limited liability company is:  
**SNP CONCEPTS LLC**

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:  
**3666 E. 109 N. IDAHO FALLS ID, 83401**

(Street Address)

(Mailing Address, if different)

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

**TYREL PARMER** **3666 E. 109 N. IDAHO FALLS ID, 83401**

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

**TYREL PARMER** **3666 E. 109 N. IDAHO FALLS ID, 83401**

(Name)

(Address)

**DAVID STACEY** **3285 CIRCLE S. DRIVE IDAHO FALLS ID, 83406**

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

**3666 E. 109 N. IDAHO FALLS ID, 83401**

(Address)

Signature of organizer(s).

Printed Name: **TYREL PARMER**

Signature: *Tyrel Parmer*

Printed Name: **DAVID STACEY**

Signature: *David Stacey*

Secretary of State use only