



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 SEP -8 AM 11:38

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

NexGen Power Systems LLC

2. The complete street and mailing addresses of the initial designated/principal office:

4657 N Arrow Villa Way
(Street Address)

Boise ID 83703
(Mailing Address, if different than street address)

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

Anthony Johannsen
(Name)

4657 N Arrow Villa Way
(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Jennifer Johannsen
Name

4657 N. Arrow Villa Way
Address

Anthony Johannsen

4657 N. Arrow Villa Way

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

4657 N Arrow Villa Way Boise, ID 83703

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature [Signature]
Typed Name: Anthony James Johannsen

Signature _____
Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
09/08/2009 05:00
CK: 388897 CT: 172899 BH: 1186842
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