

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 SEP 17 PM 12: 34

SECRETARY OF STATE STATE OF IDAHO

| 1. The name of the limited liabil | ity company is: |
|---|--|
| SQL Solutions of Idaho, LLC | |
| The complete street and mail: 13099 W. Heatherbrook Drive Boi (Street Address) (Mailing Address, if different than street address) | |
| 3. The name and complete stree | et address of the registered agent: |
| Michael A. Powell | 13099 W. Heatherbrook Drive Boise, ID 83713-1976 |
| (Name) | (Street Address) |
| The name and address of at I company: Name Michael A. Powell | east one member or manager of the limited liability Address 13099 W. Heatherbrook Drive Boise, ID 83713-1976 |
| Susan M. Powell | 13099 W. Heatherbrook Drive Boise, ID 83713-1976 |
| | |
| 5. Mailing address for future cort | respondence (annual report notices): se, ID 83713-1976 |
| 6. Future effective date of filing (| (optional): |
| Signature of a manager, memb person. | per or authorized |
| . 4. | Secretary of State use only |
| Signature Muhael a. | |
| yped Name: Michael A. Powell | IDAHO SECRETARY OF STATE |

09/17/2014 05:00

CK:11932 CT:301231 BH:1441666 10 100.00 = 100.00 ORGAN LLC #2

Signature Susav

Typed Name: Susan M. Powell