

FILED EFFECTIVE

251



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

2010 JUL - 1 PM 2:26
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Exchange #509, LLC

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

580 Jensen Grove Drive, PO Box 339, Blackfoot, ID 83221

(Street Address)

(Mailing Address, if different than street address)

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

Exchange Services, Inc.

(Name)

580 Jensen Grove Drive, Blackfoot, ID 83221

(Street Address)

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

Name

Exchange Services, Inc.

Address

580 Jensen Grove Drive, Blackfoot, ID 83221

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

580 Jensen Grove Drive, Blackfoot, ID 83221

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 _____

Typed Name: Amanda Schmidt, Organizer

Signature _____

Typed Name: _____

Idaho Form LLC-B001000001-01-01
Revised 07/2008

Secretary of State use only

IDAHO SECRETARY OF STATE
07/01/2010 05:00
CK: NONE CT: 127288 BH: 12290700
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