



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

2014 MAR 13 AM 8:58

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

T. Kofoed Painting, LLC

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

964 Division

(Street Address)

Idaho Falls, ID 83404

(Mailing Address, if different than street address)

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

Taryl L. Kofoed

(Name)

964 Division, Idaho Falls, ID 83404

(Street Address)

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

Name

Address

Taryl L. Kofoed

964 Division, Idaho Falls, ID 83404

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

964 Division, Idaho Falls, ID 83404

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Taryl L. Kofoed, Manager

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
03/13/2014 05:00
CK: 1239 CT: 272040 BH: 1415121
1 @ 100.00 = 100.00 ORGAN LLC # 2

W135461