

1.

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

The name of the limited liability company is:

2017 AUG 22 AM 8: 32

Complete and submit the application in duplicate.

SECRETARY OF STATE STATE OF IDAHO

The complete street and m	ailing addresses of the principal office is:
1977 Laura Cir Twin Falls,	- · · · · · · · · · · · · · · · · · · ·
Street Address)	
Mailing Address, if different)	
The name of the registered	agent and the street address of the registered agent:
Gary Kit Carney	1977 Laura Cir Twin Falls, ID 83301
Name)	(Address cannot be a post office box or postal mail box.)
Name)	(Address)
Namej	(Address)
Name)	(Address) correspondence (annual report notices):
Mailing address for future o	

Signature of organizer(s).

Signature:-

Printed Name: Gary Kit Carney

Signature:

Printed Name: -

Secretary of State use only

IDAKO SECRETARY OF STATE

08/22/2017 05:00 CK:5601 CT:338272 BH:1599345

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