

(Instructions on back of application)

2007 JUN -6 AM 8:45

FILED EFFECTIVE  
-6 AM 8:15

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

**Center Point LLC**

- 2. The street address of the initial registered office is:**

2034 Addison Ave East Twin Falls Idaho 83301

and the name of the initial registered agent at the above address is:

**Mark Wright**

- 3. The mailing address for future correspondence is:**

2034 Addison Ave East Twin Falls Idaho 83301

- 4. Management of the limited liability company will be vested in:**

Manager(s) ☐ or Member(s) ☒ (please check the appropriate box)

5. If management is to be vested in one or more manager(s), list the name(s) and address(es) of at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.

Name

**Address**

## Mark Wright

2034 Addison Ave East Twin Falls Idaho 83301

6. Signature of at least one person responsible for forming the limited liability company:

**Signature**

Typed Name: Mark Wright

**Capacity: Member**

**Signature**

**Typed Name:**

**Capacity:**

**Secretary of State use only**

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Revised 07/2002

Web Form

IDAHO SECRETARY OF STATE  
06/06/2007 05:00  
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