

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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

Complete and submit the application in duplicate.

Printed Name:

Signature: ______

Rev. 08/2015

FILED EFFECTIVE

2015 SEP 16 AM 8: 40

SECRETARY OF STATE

1.	The name of the limited liability company is: Go Excel, LLC		STATE OF IDAHO	
	(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., El.C., or LC) The complete street and mailing addresses of the principal office is: 485 Grandview Drive, Twin Falls, ID 83301			
2.				
	(Street Address)			
	(Mailing Address, it different)			
3.	The name and complete street address of the registered agent:			
	Gregg Olsen	3139 E 3400 N, Twin Falls, ID 83301		
	(Name)	(Address)		
4.	The name and address of at least one governor of the limited liability company:			
	Gregg Olsen	3139 E 3400 N, Twin Falls, ID 83301		
	(Name)	(Address)		
5.	Mailing address for future correspondence (annual report notices): 485 Grandview Drive, Twin Falls, ID 83301			
	(Address)			
Sig	nature of organizer(s).			
- Prir	nted Name: Erin Callen	uk)	Secretary of State use only IDAHO SECRETARY OF STATE 09/16/2015 05:00 CK:1184 CT:224300 BH:1492459 10 100.00 = 100.00 ORGAN LLC #2	

W156271