



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2013 SEP 30 AM 9:15

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Vertical Population, LLC

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

45 N 3rd East, Rexburg, ID 83440

(Street Address)

(Mailing Address, if different than street address)

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

Heriberto Paredes

(Name)

45 N 3rd East, Rexburg ID, 83440

(Street Address)

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

Name

Address

Heriberto Paredes

45 N 3rd East, Rexburg ID, 83440

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

45 N 3rd East, Rexburg ID 83440

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Typed Name: Heriberto Paredes

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
09/30/2013 05:00
CK: 1009 CT: 267976 BH: 1391957
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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