Signature

Signature___

Typed Name: Stephen V. Sutton, DMD

Typed Name: Quincy Sutton

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2011 MAR 16 AM 9: 58

Stept	nen & Quincy Sutton Investments, LLC
2090 W. Arimo Road, Arimo, ID 8	ing addresses of the initial designated/principal office:
(Sireet Address)	
(Malling Address, if different than street as	ddress)
The name and complete street	et address of the registered agent:
Stephen V. Sulton, DMD	2090 W. Arimo Road, Arimo, ID 83214
(radition)	(Street Address)
The name and address of at le	east one member or manager of the limited liability
<u>Name</u>	<u>Addrese</u>
Stephen V. Sutton, DMD	2090 W. Arimo Road, Arimo, ID 83214
Quincy Sutton	2090 W. Arimo Road, Arimo, ID 83214
Mailing address for fulum course	
2090 W. Arimo Road, Arimo, ID 832	espondence (annual report notices): 214
Future effective date of filing (o	optional):
	

COT_DYS_NC Rev. 02/7010

IDAHO SECRETARY OF STATE 03/16/2011 05:00 CK: NONE CT: 2982 BH: 1264563 1 @ 100.00 = 100.00 ORGAN LLC # 3