

Patrole IIC

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:

Signature:

Printed Name: --

Rev. 11/2015

Complete and submit the application in duplicate.

2016 APR 14 AM 9: 51

SECRETARY OF STATE

(1)165262

303 Main Ave E, Twin Falls (Street Address)	10 00001	
(Ontoll radioss)		
(Mailing Address if different)		
The name of the registered	agent and the street address of the regis	tered agent:
Susan Petruzzelli	3090 Highlawn Dr, Twin Falls, ID 83301	
(Name)	(Address cannot be a post office box or postal mail box)	
The name and address of a	least one governor of the limited liability	company
Susan Petruzzelli	3090 Highlawn Dr, Twin Falls, ID 83301	
Name)	(Address)	10 00001
(Name)	(Address)	
(Name)	(Address)	
Name)	(Address)	
Mailing address for future of	prrespondence (annual report notices):	
303 Main Ave E, Twin Falls	ID 83301	
(Address)		
ature of organizer(s).	0	
Chus	a 11V	cretary of State use only
ature: Show & M2	· <u>1-</u>	04/14/2016 05:00
ed Name: Susan Petruzzelli		809 CT:183999 BH:152359:
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