

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 OCT -7 AM 10: 23

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

G Robert Arnold LLC

2. The complete street address, and mailing address if different, of the initial designated/ principal office:

2814 Sugar Cane Drive, Nampa ID, 83687

3. The name of the commercial registered agent; or the name and complete street address of the non-commercial registered agent:

National Registered Agents, Inc. 1423 Tyrell Lane Boise, ID 83706 County of Ada

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

Name

Address

Gregory R. Arnold

2814 Sugar Cane Drive, Nampa ID, 83687

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

c/o: 2814 Sugar Cane Drive, Nampa ID, 83687

6. Future effective date of filing (optional):

Signature of an organizer(s). (An organizer is a member, or is acting in behalf of a required, and existing, initial member or members).

Signature K

Typed Name: Karmelia Fredrick, Assistant Secretary

Signature _____

Typed Name: _____

Secretary of State use only

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IDAHO SECRETARY OF STATE
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