



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2015 FEB -5 AM 9:41

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Mountain West IT, LLC

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

18856 N Streams Edge Pl, Boise, ID 83714

(Street Address)

(Mailing Address, if different than street address)

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

Laura Larson

(Name)

18856 N Streams Edge Pl, Boise, ID 83714

(Street Address)

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

Name

Address

Todd Larson

18856 N Streams Edge Pl. Boise, ID 83714

LAURA LARSON

18856 N. STREAMS

REGHE ESPIN

18182 N. HIGH FIELD WAY BOISE, ID, 83714

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

18856 N Streams Edge Pl, Boise, ID 83714

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Todd Larson

Typed Name: Todd Larson

Signature \_\_\_\_\_

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

02/05/2015 05:00

CK:2551088 CT:172099 BH:1460335

1@ 100.00 = 100.00 ORGAN LLC #2

W147424