

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

10 MAY 21 AM 8: 55

1. The name of the limited liability company is	SECRETARY OF STATE	
QS&G		
2. The complete street and mailing addresses	• • •	
1020 Kelly Ave. Ki	imberly, ID 83341	
(Street Address)		
(Mailing Address, if different than street address)		
3. The name and complete street address of the	he registered agent:	•
Angelina Campbell	1020 Kelly Ave. Kimberly, ID 83341	
(Name) (Street A	Address)	
The name and address of at least one mem company:	ber or manager of the limited liability	
Name	Achtreas	
Angelina Campbell	1020 Kelly Ave. Kimberly, ID 83341	
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	A Company of the Comp	
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		Tim na in Santa di
 Mailing address for future correspondence (annual report notices):	1
1020 Kelly Ave. Ki	imberly, ID 83341	·
Future effective date of filing (optional):	n/a	-
		·
ignature of organizer(s). (An organizer is a member,	or is	
ting in behalf of a member or members).	Secretary of State use only	
ignatura de la colonia	Section of State and May	
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yped Name: Angelina Campbell	- July	
ignature	- The control of th	STATE 35 : 99 1: 1223357
yped Name:	1 2 100 00 = 100 00 /2	MAN LLC I