

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

11 AUG 24 PM 12:43

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

NORTHWEST CREMATION Supply LLC.

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

5140 SAWYER SUITE I, GARDEN CITY 83714
(Street Address)

P.O. BOX 140698, BOISE, ID 83714-0698
(Mailing Address, if different than street address)

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

Glen A. Jensen
(Name)

5140 SAWYER SUITE I GARDEN CITY
ID 83714
(Street Address)

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

<u>Name</u>	<u>Address</u>
<u>Glen Jensen</u>	<u>P.O. BOX 140698 BOISE, ID</u> <u>83714-0698</u>
_____	_____
_____	_____
_____	_____

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

P.O. BOX 140698, BOISE, ID 83714-0698

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature [Handwritten Signature]
Typed Name: Glen A. Jensen

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
08/24/2011 05:00
CK: CASH CT: 261839 DM: 1287813
1 @ 100.00 = 100.00 ORGAN LLC # 2

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