

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(2)			14 AM 9: 04
CO T	(Instructions on bac	k of application)	SECRETARIA
1.	The name of the limited liability co	mpany is:	CTANGE OF STATE
••			
	~		
2.	The complete street and mailing addresses of the initial designated office:		
	3424 N. Can Ada Road, Nampa, Idaho 83687		
	(Street Address) Same		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Titus Gilliam	same	
	(Name)	(Street Address)	
	Company: Name Titus Cillian	como	Address
	Titus Gilliam	same	
		<u> </u>	
5.	Mailing address for future correspondence	ondence (annual	report notices):
	same		
6.	Future effective date of filing (option	nal):	
Sia	nature of a manager, member o	r authorized	
_	son.		
	Thomas	:	Secretary of State use only
_	nature VIII		IDAHO SECRETARY OF STATE
Тур	ed Name: Titus Gilliam		05/14/2014 05:00
			CK:1232 CT:296846 BH:1424657 1@ 100.00 = 100.00 ORGAN LLC #
Sigi	nature		TO TOO. OF TOO. OF CROSSIF LILL #
_	ed Name:		W137882
,,			1110100