

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 JUL -2 PM 4: 19

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

MADELEINE SHEILS LLC

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

702 W Idaho Ste. 700, Boise, ID 83702

(Street Address)

PO Box 1271, Boise, ID 83701

(Mailing Address, if different than street address)

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

Bart W. Harwood

(Name)

702 W Idaho Ste. 700, Boise, ID 83702

(Street Address)

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

Name**Address**

Max M. Sheils, Jr.

707 N 8th, Boise, ID 83701

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

PO Box 388, Boise, ID 83701

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Bart W. Harwood

Signature

Typed Name:

Secretary of State use only

 IDAHO SECRETARY OF STATE
 07/03/2012 05:00
 CK: NONE CT: 22597 BH: 1330650
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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