

FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2015 FEB -3 PM 3: 34

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

JA Solutions LLC

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

616 N. 3rd Street, Suite 103, McCall, Idaho 83638

(Street Address)

P.O. Box 4210, McCall, Idaho 83638

(Mailing Address, if different than street address)

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

Gregory A. Byron

(Name)

3101 W. Main, Suite 200, Boise, Idaho 83702

(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>
Anntara Smith, Manager	5500 E. Quartersawn St., Boise, Idaho 83716
Jennifer Coombs, Manager	1866 E. Logan Ave., Salt Lake City, Utah 84108
Kirk G. Smith, Manager	P.O. Box 4210, McCall, Idaho 83638

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

P.O. Box 4210, McCall, Idaho 83638

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

Signature of a manager, member or authorized person.

Signature
Typed Name: Gregory A. Byron, Organizer

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/03/2015 05:00
CK:7976 CT:44531 BH:1460136
1@ 100.00 = 100.00 ORGAN LLC #2

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