

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

2017 AUG 28 AM 11: 52

SECRETARY OF STATE STATE OF IDAHO

(Remember to include the v	vords "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and ma	iling addresses of the principal office is:
439 E Shore Dr Suite 100 E	agle, ID 83616
Street Address)	
PO Box 2085 Eagle, ID 836	16
Mailing Address, if different)	
The name of the registered a	agent and street address of the registered agent:
Travis Thompson	439 E Shore Dr Suite 100, Eagle ID 83616
Name)	(Address cannot be a post office box or postal total box)
Travis Thompson	least one governor of the limited liability company: 439 E Shore Dr Suite 100, Eagle, ID 83616
The name and address of at Travis Thompson Name)	• • • • • • • • • • • • • • • • • • • •
Travis Thompson Name)	439 E Shore Dr Suite 100, Eagle, ID 83616
Travis Thompson Name)	439 E Shore Dr Suite 100, Eagle, ID 83616 (Address)
Name)	439 E Shore Dr Suite 100, Eagle, ID 83616 (Address)
Travis Thompson	439 E Shore Dr Suite 100, Eagle, ID 83616 (Address)
Name) Name)	439 E Shore Dr Suite 100, Eagle, ID 83616 (Address) (Address)
Name) Name) Name) Name)	439 E Shore Dr Suite 100, Eagle, ID 83616 (Address) (Address)
Name) Name) Name) Name) Name) Mailing address for future co	439 E Shore Dr Suite 100, Eagle, ID 83616 (Address) (Address) (Address) (Address) orrespondence (annual report notices):
Name) Name) Name) Name)	439 E Shore Dr Suite 100, Eagle, ID 83616 (Address) (Address) (Address) (Address) orrespondence (annual report notices):

1DAHO SECRETARY OF STATE 08/28/2017 05:00

CK:14466072 CT:172099 BH:1600072 10 100.00 = 100.00 ORGAN LLC #2 10 20.00 = 20.00 EXPEDITE C #3

W187816

Rev. 11/2015

Signature:

Printed Name: Travis Thompson

Printed Name: