

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 2013 SEP 30 AM 9: 42

(Instructions on back of application) CECRETARY OF STATE

1.	The name of the limited liability co	ompany is: STATE OF IDAHO
	Impact Electric LLC	•
2.	The complete street and mailing addresses of the initial designated office: 2208 Ironwood dr. Driggs Id. 83422	
	(Street Address) P O Box 659 Victor Id. 83455 (Mailing Address, if different than street address)	
3.	The name and complete street address of the registered agent:	
	Dustin Christensen	2208 Ironwood dr. Driggs Id. 83422
	(Name)	(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>
	Dustin Christensen	P O Box 659 Victor Id. 83455
		<del>-</del>
5.	Mailing address for future correspondence P O Box 659 Victor Id. 83455	ondence (annual report notices):
6.	Future effective date of filing (option	onal):
_	nature of a manager, member o	or authorized  Secretary of State use only
Si~	nature Duti Chicken	·
	ped Name: Dustin Christensen	
ıуļ	Jeu Haille.	
Sia	nature	IDAHO SECRETARY OF STATE
	ped Name:	09/30/2013 05:00
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