



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 JAN -2 PM 1:15

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

IRWA Support Services, LLC

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

6065 W. Corporal Lane, Boise, ID 83704

(Street Address)

(Mailing Address, if different than street address)

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

Shelley Roberts

(Name)

6065 W. Corporal Lane, Boise, ID 83704

(Street Address)

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

Name

Address

Idaho Rural Water Association, Inc.

6065 W. Corporal Lane, Boise, ID 83704

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

6065 W. Corporal Lane, Boise, ID 83704

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

Signature of a manager, member or authorized person.

Secretary of State use only

Signature Shelley Roberts

Typed Name: Shelley Roberts

Signature _____

Typed Name: _____

IDAHO SECRETARY OF STATE

01/02/2014 05:00

CK: 3873 CT: 155198 BH: 1483975

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