

Rev. 11/2015

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

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

Complete and submit the application in duplicate.

No. 0197 P. 2

## FILED EFFECTIVE

2017 MAY -3 PM 4: 18

SECRETARY OF STATE STATE OF IDAHO

(Remember to include the	words "Limited Liability Company." "Limi	ited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and ma	alling addresses of the princip mon ID 83406	al office is:
(Street Address)		
(Mailing Address, if different)	<del></del>	
The name of the registered	agent and the street address	of the registered agent:
Devlin Anderson	4168 Birchwood Circle, Ammon, ID 83406	
(Name)	(Address cannot be a post office box or postal mail box.)	
The name and address of a	it least one governor of the lim	lited liability company:
Devlin Anderson	4168 Birchwood Circle, Ammon ID 83406	
(Name)	(Address)	
(Name)	(Address)	
(Name)	(Address)	
(Nanie)	(Address)	
Mailing address for future of 4168 Birchwood Circle, Am	orrespondence (annual report mon, ID 83406	t notices):
(*1001 <i>655)</i>		
eature of organizer(s).	)	Secretary of State use only
ature: <u>Devlin</u> And	lroen_	
ted Name; Devlin Anderson		1DAHO SECRETARY OF STATE 05/03/2017 05:00
Lea Harrio,		CK: 13335494 CT: 172099 BH: 158236
ature:		16 100.00 = 180.00 DRGAN LLC #
		1211VA 1012
ted Name:		W182783