251

FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2013 OCT -1 PM 4: 08

SECRETARY OF STATE STATE OF IDAHO (Instructions on back of application)

<ol> <li>The name of the limited liability con</li> </ol>	npany is:	
3DP, LLC		
2. The complete street and mailing add	resses of the	initial designated office:
2040 IN WOOdfull Ave, Idaho Falls, ID 834	01	and a congriding office,
(Street Address)		·
(Malling Address, if different than street address)	<del></del>	
3. The name and complete street addre	ss of the regis	stered agent:
K. Jayce Howell	2345 N Woodniff Avg. Idaha Falla ID ag	
(Name)	2345 N Woodruff Ave, Idaho Falls, ID 83401 (Street Address)	
	(	
<ol> <li>The name and address of at least on company:</li> </ol>	e member or r	nanager of the limited liability
Name		
K. Jayce Howell	Address 2345 N Woodruff Ave, Idaho Falls, ID 83401	
		Ave, Idano Falis, ID 83401
	<del></del>	
	<del></del>	
	<del></del>	
5. Mailing address for future correspond		
and a decision to the corresponde	∍nce (annual r	eport notices):
2345 N Woodruff Ave, Idaho Falls, ID 83401		·
_		
<ol><li>Future effective date of filing (optional)</li></ol>	ı <b>:</b>	
Signature of a manager, member or au		
erson.	imorized	
	<u> </u>	Secretary of State use only
ignature		Operational of State fire out
yped Name: K Jayce Howell	<del>-</del>	
ypod Mario.		
ion at	1	
gnature		·
yped Name:	_	
		IDAHO SECRETARY OF STATE
cert_on	g Sc Rev. 07/2010	10/02/2013 05:00 CK: 1568873 CT: 172899 BH: 139239

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