



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2009 DEC 10 PM 4:40

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

D & K Recovery, LLC

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

2540 W. Berkley Ln, Hayden, ID 83835

(Street Address)

(Mailing Address, if different than street address)

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

David P. Lachapelle

(Name)

2540 W. Berkley Ln, Hayden, ID 83835

(Street Address)

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

Name

Address

David P. Lachapelle

2540 W. Berkley Ln, Hayden ID 83835

Kevin C. Searls

2540 W. Berkley Ln, Hayden ID 83835

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

2540 Berkley Ln Hayden, ID 83835

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

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: David P. Lachapelle

Signature

Typed Name: Kevin C. Searls

Secretary of State use only

gr:corporations llc formation org id:PMID
Revised 07/2008

IDAHO SECRETARY OF STATE
12/11/2009 05:00
CK: 357336 CT: 172099 BH: 1190721
1 @ 100.00 = 100.00 ORGAN LLC # 2

W88935