## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

## FILED EFFECTIVE

(Instructions on back of application)

2015 APR -2 AM 11: 59

| (IIISTRICTIONS ON DACK   | or application            | •   |
|--|---------------------------|---|
| 1. The name of the limited liability com                                 | npany is:                 | SECRETARY OF STATE<br>STATE OF IDAHO                                  |
| ARK Ridge, LLC   |                           |   |
| 2. The complete street and mailing add                                   | dresses of th             | e initial designated office:  |
| (Street Address) MorningSide Wa.   | y Bois                    | e, ID 837/2   |
| (Mailing Address, if different than street address)                      |                           |   |
| 3. The name and complete street address                                  |                           |   |
| Angela Parekh<br>(Name)  | 677 N.<br>(Street Address | Morningside Way Brise ID<br>83712                                     |
| 4. The name and address of at least or company:                          | ne member d               | or manager of the limited liability                                   |
| <u>Name</u>  |                           | Address   |
| Angela Parekh  | 677 N. N.                 | borningside Way Boise (D 837/2.                                       |
| Kunal Parekh   | 677N. 7                   | Porningside Way Boise ID 837/2.<br>Morningside Way Boise ID 837/2     |
|  |                           |   |
|  |                           |   |
|  |                           |   |
| 5. Mailing address for future correspon                                  | •                         | •   |
| 677 N. Morningside Way   | Boise, i                  | 10 837/2  |
| 6. Future effective date of filing (option                               | al):                      |   |
| Signature of a manager, member or person.                                | authorized                |   |
| Signature <u>Angela S. Parekh</u><br>Syped Name: <u>Angela S. Parekh</u> |                           | Secretary of State use only IDAHO SECRETARY OF STATE 04/02/2015 05:00 |
| Typed Name: <u>Angela S. Yarek</u>                                       | h                         | CK:5654 CT:308455 BH:1469083<br>16 100.00 = 100.00 ORGAN LLC          |
| Signature  |                           | WHQQIS  |
| Typed Name:  |                           | 211 / 112   |