



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 DEC 17 PM 1:20

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Chloah LLC

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

114 Syringa Lane, Syringa, ID 83539

(Street Address)

(Mailing Address, if different than street address)

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

SynEx, LLC

(Name)

921 S. Orchard Street, Suite G, Boise, ID 83705

(Street Address)

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

Name	Address
Heidi Grimes	114 Syringa Lane, Syringa, ID 83539
_____	_____
_____	_____
_____	_____
_____	_____

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

921 S. Orchard Street, Suite G, Boise, ID 83705

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

Signature of a manager, member or authorized person.

Signature Curtis Sweltz

Typed Name: Curtis Sweltz

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
12/17/2010 05:00
CK: 5279 CT: 221026 BH: 1251390
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

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