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CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

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The name of the li	mited liability company is:	SECRETARY OF STATE OF IDAHC	aië)
	Powers Investme	enis, elo	
The complete street	et and mailing addresses of 1155 Wilson, Pocatell	the initial designated/principal office o, Idaho 83201	9;
(Street Address)	same		
(Malling Address, if differe	nt than street address)		
-	nplete street address of the	registered agent:	·
David J. F	'owers	1155 Wilson, Pocatello, Idaho 83201	
(Name)	(Street Add		
company:	armē	er or manager of the limited liability Address 1155 Wilson, Pocatello, Idaho 83201	
David J.	Powers	TIDD VVIISOR, FOCAMINO, ICARIO GOZOT	
. Mailing address fo	or future correspondence (a	nnual report notices):	
	1155 Wilson, Pocate	illo, Idano 83207	
3. Future effective of	ate of filing (optional):		· · · · · · · · · · · · · · · · · · ·
ignature of organize	r(\$). (An organizer is a member, o		
cung in bendir of a mem	O AA /	Secretary of State use only	
Signature	Un officer	- 3	
Typed Name:	David J. Powers	- 37 - 19 - 19 - 19 - 19 - 19 - 19 - 19 - 1	
Signature			95:2
-		CK: 5922 CT: 2982 1 1 @ 100.08 = 189.00	BH: 11815
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