



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 DEC 31 PM 2:08

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Meridian Surplus LLC

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

331 N Main St Meridian, Idaho 83642

(Street Address)

(Mailing Address, if different than street address)

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

Doug Holmes

(Name)

304 W Broadway Meridian, Id 83642

(Street Address)

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

Name

Address

Doug Holmes

304 W Broadway Meridian ID 83642

Michael Hoskins

P.O Box 503 Cascade, Id 83611

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

331 N Main St Meridian, Id 83642

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

Michael Hoskins

Typed Name: Michael Hoskins

Signature

Doug Holmes

Typed Name: Doug Holmes

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
12/31/2009 05:00
CK: CASH CT: 243489 BH: 1201451
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