

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2015 AUG 20 AM 8: 15

08/20/2015 05:00

CK:3136646 CT:172099 BH:1488996

16 20.00 = 20.00 CORP SUR #2

(Instructions on back of application)

	(manachona chi bach	t of application)	OEO
1. The nam	The name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO
Gell	ipped LLC		O. IDAID
		dresses of the initial designa	ated office:
		o Ells, ID 83402	
(Street Add	iress)		
(Mailing Ac	ddress, if different than street address)		
3. The nam	ne and complete street add	ress of the registered agent:	
JO YO (Name)	lan Christiansen	4000 Rarossa Dr. (Street Address)	IFID 83404
The nam		one member or manager of t	he limited liability
-	Name A	Addres	
_Joro	lan (hilstoansch	4000 Brossa Dr. Jos 1270 Elmore Ave Jole	thatalls. 20 83404
Justi	n Elliott	1270 Elmore Ave Tele	ch falls ID 83402
			
			
. Mailing a	address for future correspo	ndence (annual report notice	es).
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. Future e	ffective date of filing (option	nal):	
_	of a manager, member or	authorized	
erson.	0 1 2 -	Sec	retary of State use only
ignature 矣	Lhelle		AHO SECRETARY OF STATE
yped Name	: Jordan Christia		8/20/2015 05:00 31 CT:313693 BH:1488
	2. L. Mark	16 100.	00 = 100.00 DRGAN LLO
ignature	an sulfail	1	N155299
yped Name	: _3657.4 E11.011	II	AHO SECRETARY OF STATE