

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 2015 APR 16 AM 9: 09

WE:	(Instructions on b	ack of application	OFFICE OF STATE
1.	The name of the limited liability	company is:	SECRETALM OF STATE STATE OF IDAHO
	DOCID2 LLC		
2.	The complete street and mailing 4052 W Quail Hill Ct	addresses of the	e initial designated office:
	(Street Address) Boise, Idaho 83703		
	(Mailing Address, if different than street address)		
3 .	The name and complete street address of the registered agent:		
	David Hassinger	4052 W Quail	Hill Ct, Boise Idaho 83703
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name Name	4000 W O **	Address
	David Hassinger	4052 W Quali	Hill Ct, Boise Idaho 83703
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5.	Mailing address for future corres 4052 W Quail Hill Ct, Boise Idaho 83	•	al report notices):
6.	Future effective date of filing (optional):		
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_	inature of a manager, member son.	r or authorized	
po.			Secretary of State use only
Sig	nature		
Тур	ped Name: David Hassinger		IDAKO SECRETARY OF STATE 04/16/2015 05:00
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T1/2	and Name:	Į.	

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