

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code
Base Filing fee: \$100.00 typed, \$120 not typed
Complete and submit the application in <u>dupilicate</u>

FILED EFFECTIVE

2018 FEB - 1 PM 2: 35

SECRETARY OF STATE STATE OF IDAHO

	mited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC, or LC)
The complete street and mailing add 3567 N 3100 E TWIN FALL	iresses of the principal office is:
300/ N 3100 E 1991N FALL Street Address)	3 1D 0330 1
(211 get Variages)	
(Mailing Address, if different)	
The name and complete street addr	ess of the registered agent:
MALISA NORRIS	3567 N 3100 E TWIN FALLS ID 83301
(Name)	(Address)
Mailing address for future correspor 3567 N 3100 E TWIN F.	
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3567 N 3100 E TWIN F.	
3567 N 3100 E TWIN F. (Address) ature of organizer(s).	ALLS ID 83301
3567 N 3100 E TWIN F.	ALLS ID 83301

Printed Name: MALISA NORRIS

Signature: Malla Nonio

Rev. 01/2018

CK:16320886 CT:172099 BH:1624654 16 100.00 = 100.00 ORGAN LLC #2 16 20.00 = 20.00 EXPEDITE C #3

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