

CERTIFICATE OF ORGANIZATION LED EFFECTIVE LIMITED LIABILITY COMPANY 2014 FEB -3 AM 9: 58

| ALT OF | (Instructions on bac | ck of application) | CECDETABLY OF OTATE |
|----------|--|---------------------|---|
| 1. TI | he name of the limited liability of | ompany is: | SECRETARY OF STATE STATE OF IDAHO |
| | Cnidaria, LLC | | OIMIE UT IUMTU |
| 2. TI | The complete street and mailing addresses of the initial designated office: 8747 W Ben Ct, Boise, Idaho 83714 (Street Address) | | |
| 1 | | | |
| (| | | |
| (| (Mailing Address, if different than street address) | | |
| 3. Ti | The name and complete street address of the registered agent: | | |
| I | Eric Kennedy 8747 W Ben Ct, Boise, Idaho 83 | | se, Idaho 83714 |
| 7 | (Name) | (Street Address) | - |
| | The name and address of at least one member or manager of the limited liability company: | | |
| | <u>Name</u> | | <u>Address</u> |
| _ | Eric Kennedy | 8747 W Ben Ct, Boi | se, Idaho 83714 |
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| _ | | _ | |
| | | | |
| | lailing address for future correspondence | ondence (annual rep | ort notices): |
| - | 8747 W Ben Ct, Boise, Idaho 83714 | | |
| 6. F | uture effective date of filing (optic | onal): | |
| | | | |
| _ | iture of a manager, member of | or authorized | |
| perso | n. , | : | Secretary of State use only |
| Signa | ture I kem | | • |
| • | Name: Eric Kennedy | | |
| .,,,,,,, | A CONTRACTOR OF THE PROPERTY O | | |
| Signa | ture | | IDAHO SECRETARY OF STATE 02/03/2014 05:00 |
| Typed | d Name: | <u>-</u> | CK: 1629 CT: 292524 BH: 1486846 |

CK: 1629 CT: 292524 BH: 1486046 1 0 188.88 = 188.88 ORGAN LLC # 2

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