

Rev. 11/2015

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2016 AUG 26 PM 3: 52

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited liability company is:		
	(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)		
2.	The complete street and mailing addresses of the principal office is: 580 JENSEN GROVE DR., BLACKFOOT, ID 83221		
	(Street Address) PO BOX 339, BLACKFOOT, ID 8		
	(Malling Address, if different)		
3.	The name of the registered agent and the street address of the registered agent:		
	Title Financial Specialty Services Inc 580 Jensen Grove Dr., Blackfoot, ID 83221		
	(Name) (Address cannot be a post office box or postal mail box.)		
4.	The name and address of at least one governor of the limited liability company:		
	Shauna Romrell, President	PO Box 339, Blackfoot, ID 83221	
	(Name)	(Address)	
	(Name)	(Address)	
	(Namo)	(Address)	
	(Namo)	(Address)	
5.	Mailing address for future correspondence (annual report notices):		
	PO Box 339, Blackfoot, ID 8332	1 	
	(Address)		
Sia	nature of organizer(s)		
			Secretary of State use only
Sig	nature: Valentin	46	
Printed Name: Shauna Romrell, President			IDAHO SECRETARY OF STATE
Signature:			08/26/2016 05:00 CK:PREPAID CT:127288 BH:1543751 1@ 100.00 = 100.00 ORGAN LLC #2 1@ 20.00 = 20.00 EXPEDITE C #3
Prir	nted Name:		The same and the s

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