

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2016 JUN 20 AM 10: 28

	(การแน	ctions on back of ap	plication)	SECRETARY OF STATE	
1. The name of the limited		ted liability company	is:	STATE OF IDAHO	
	Wylie	_LC			
		and mailing addresse	es of the initial designate	ed office:	
	N. Claredon Way,	<del>-</del>	J		
(Street	Address)				
(Mailing	Address, if different t	han street address)			
3. The na	The name and complete street address of the registered agent:				
Jame	James R. Wylie IV 1676 N. Claredon		3 N. Claredon Way, Eagle, ID	on Way, Eagle, ID 83616	
(Name)	)	(Stre	(Street Address)		
4. The na			ember or manager of the Address	e limited liability	
Jame	James R. Wylie IV		1676 N. Claredon Way, Eagle, ID 83616		
	g address for fu N. Claredon Way,		e (annual report notices	<b>)</b> :	
6. Future	effective date	of filing (optional): _		· · · · · · · · · · · · · · · · · · ·	
Signature person.	of a manage	r, member or auth			
	Mil 1	<b>5</b> [/		ary of State use only O SECRETARY OF STATE	
Signature_	James R M	/ylle IV, Member	- 06,	/20/2016 05:00	
ryped Nai	Me: James K. W	Ado IA' MACHINAS		CT:325860 BH:15339 = 100.00 ORGAN LLC	
Signature					
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