



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

12 MAR 26 PM 12:00

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Kolb Metal Kraft L.L.C.

2. The complete street and mailing addresses of the initial designated office:

5627 N. Collister Drive, Boise, ID 83703

(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Scott Kolb

(Name)

Same as Line Two

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Address

Scott Kolb

5627 N. Collister Drive, Boise, ID 83703

5. Mailing address for future correspondence (annual report notices):

5627 N. Collister Drive, Boise, ID 83703

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Scott Kolb

Typed Name: Scott Kolb

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
03/26/2012 05:00
CK: 179 CT: 268527 BH: 1316821
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