

FILED EFFECTIVE

251



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 DEC -9 AM 9: 37

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

TFES 543, LLC

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

580 Jensen Grove Dr., Blackfoot, ID 83221

(Street Address)

P.O. Box 339, Blackfoot, ID 83221

(Mailing Address, if different than street address)

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

Title Financial Specialty Services Inc

(Name)

580 Jensen Grove Dr., Blackfoot, ID 83221

(Street Address)

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

Name**Address**

Shauna Romrell, President

580 Jensen Grove Dr., Blackfoot, ID 83221

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

P.O. Box 339, Blackfoot, ID 83221

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Shauna Romrell, President

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

12/09/2013 05:00

CK: NONE CT: 127200 BH: 1400044

1 @ 100.00 = 100.00 ORGAN LLC # 2

1 @ 20.00 = 20.00 EXPEDITE C # 3

W131817