

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

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SECRETARY OF STATE STATE OF IDAHO 2. The complete street and mailing addresses of the initial designated office: 4061 Highway 8, Troy, Idaho 83871 (Street Address) PO Box 297, Troy, Idaho 83871 (Mailing Address, if different than street address) 3. The name and complete street address of the registered agent: Casey Leachman (Name) (Street Address) 4061 Highway 8, Troy, Idaho 83871 (Street Address) 4061 Highway 8, Troy, Idaho 83871 (Street Address) 4061 Highway 8, Troy, Idaho 83871 (Name) Address Casey Leachman PO Box 297, Troy, Idaho 83871 5. Mailing address for future correspondence (annual report notices): PO Box 297, Troy, Idaho 83871 6. Future effective date of filing (optional): January 1, 2012 Inginature of a manager, member or authorized erson. Secretary of State use only inginature January 1, 2012 January 1, 2013 January 1, 2014 January 1,		(Instructions on	back of application)	AM 9:115
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