

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2013 DEC 11 PM 3: 40

1. The name of the limited liability co	mpany is: SECRETARY OF STATE STATE OF IDAHO
DEPEND FI	ductary and Care Services LLC
2. The complete street and mailing ac 8081 E. Australis Dr., Nampa, Idaho, 836 (Street Address)	ddresses of the initial designated/principal office:
(Mailing Address, if different than street address)	
. The name and complete street add	ress of the registered agent:
United States Corporation Agents, Inc.	3006 E. Goldstone Drive, Suite 218, Meridian, ID 83642
	(Street Address)
The name and address of at least c company:	one member or manager of the limited liability
<u>Name</u>	Address
Cassie Hill	8081 E. Australis Dr., Nampa, Idaho 83687
A Partition and Addition of the Partition of the Partitio	
Mailing address for future correspondance 8081 E. Australis Dr., Nampa, Idaho 8368	
Future effective date of filing (option	al):
nature of a manager, member or	authorized
nature	Secretary of State use only
ed Name: Cheyenne Moseley, Assistant Secretary, LegalZoom.com, Inc.	c.
nature	
ed Name:	IDAHO SECRETARY OF STATE

CK: 1636937 CT: 172099 BH: 1401381 1 0 100.00 = 100.00 ORGAN LLC # 2 1 0 20.00 = 20.00 EXPEDITE C # 3