

**FILED EFFECTIVE**

# **CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY**

(Instructions on back of application)

2015 MAY 15 PM 2:57

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

HCB, LLC

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

1412 W. Villa Norte, Boise, ID. 83702

(Street Address)

(Mailing Address, if different than street address)

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

Dean C. Sorensen

(Name)

1423 Tyrell Ln., Boise, ID. 83706

(Street Address)

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

NameAddress

Hal C. Baird

1412 W. Villa Norte, Boise, ID. 83702

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

1412 W. Villa Norte, Boise, ID. 83702

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature

Typed Name: Hal C. Baird, Member/Manager

Signature

Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE

05/15/2015 05:00

CK:12417 CT:19533 BH:1475689

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