

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2014 HAY -5 AM 9: 07

CE9	(Instructions on back	k of application)	QEAD ETERM OF OTET	
1. 7	The name of the limited liability co	mpany is:	SEORETANY OF STATE STATE OF DAHO	
	Wapitirunner LLC			
2. 1	The complete street and mailing addresses of the initial designated office:			
	2137 Monticello Drive, Idaho Falls, ID 83404			
	(Street Address)			
	(Mailing Address, if different than street address)			
3. 1	The name and complete street address of the registered agent:			
	Steve Janzen	2137 Monticello D	Drive, Idaho Falls, ID 83404	
	(Name)	(Street Address)	complete and compl	
, ,	Marian			
	The name and address of at least one member or manager of the limited liability company:			
	Name		Address	
	Steve Janzen	2137 Monticello D	Orive, Idaho Falls, ID 83404	
		<u> </u>		
5. f	Mailing address for future correspo	-	eport notices):	
	2137 Monticello Drive, Idaho Falls, ID 8	3404		
6. F	Future effective date of filing (option	nei):		
-	ature of a manager, member of	r authorized		
perse	on. 💉 i i		Secretary of State use only	
Cian	5/2/14		•	
_	d Name: Steve Janzen		IDAHO SECRETARY OF STATE 05/05/2014 05:00	
ıype	d Name: Steve Janzen		CK:2106 CT:296466 BH:14233	

10 100.00 = 100.00 ORGAN LLC #2

W131536

Signature ___ Typed Name: _