



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

11 SEP 30 AM 9:03

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

ANTIQUE RECREATION LLC

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

1361 TWIN BUTTE ROAD

(Street Address)

MENAN, ID 83434

(Mailing Address, if different than street address)

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

DANIELLE ANDREW

(Name)

1361 TWIN BUTTE ROAD, MENAN ID 83434

(Street Address)

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

Name

Address

DANIELLE ANDREW

1361 TWIN BUTTE ROAD, MENAN ID 83434

MARK ANDREW

1361 TWIN BUTTE ROAD, MENAND ID 83434

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

1361 TWIN BUTTE ROAD, MENAN ID 83434

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: DANIELLE ANDREW

Signature

Typed Name: MARK ANDREW

Secretary of State use only

IDAHO SECRETARY OF STATE
09/30/2011 05:00
CK: 2945 CT: 262982 DH: 1292498
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