



## CERTIFICATE OF ORGANIZATION

For Office Use Only

## -FILED-

U

	LIMITED LIAB	ILITY COMPANY	File #: 0003787355	13
100	Title 30, Chapters 21 and	d 25, Idaho Code	Date Filed: 2/21/2020 12:38:00 PM	¥ *4.2
	Base Filing fee: \$100.00 +	\$20.00 for manual processing	(form must be typed).	\$1.00HK
1.	The name of the limited liability company is:			143
	tradition hides llc			<b>∮</b> ∴a6:-
	(Remember to include the words "Limited Liability Company," "Limited Company, "or the abbreviations L.L.C., LLC. or LC)			n e
2.	The complete street and mailing addresses of the principal office is:			(mil (X)
	109 east Park	Street McCa	U ID 83638	g
	(Street Address)			<u></u>
	(Mailing Address, Edifferent)	McCall ID	03638	T
3.	The name and complete street address of the registered agent:			
<b>J</b> .				joda et
	Laura grace simon		Street McCall ID 8363	8
	(Name)	(Address)		
4.	The name and address of at least one governor of the limited liability company:			
	Lauragracesmon	PO BOX #1834	McCall ID 83638	1=1
	(Name)	(Address)	, , , ,	17)
				i D
	(Name)	(Acaress)		<u> </u>
				(D) Office
	(Name)	(Accress)		
	(,	( a.v. v.v.)		
	(Namo)	(Addmss)		1/0
<b>5</b> .	Mailing address for future correspondence (annual report notices):			ict (10)
	PO BOX #1834	t McCall idaho	83638	ut 19
	(Mailing Address)			
Sign	ature of organizer(s).			
Deint	ad Name: LAURA ADAGE C	2010/0	Secretary of State use only	l <sub>k</sub>
FILL	ed Name.	TYVOVI		[ ] 
Sign	ed Name: Laura graces ature: Laura gracesium	, )		17
Olgii	and a grant of the second of			ì",
Print	ed Name:			i] :5
		<del></del>		; !
Sign	ature:			¥.;
Revised	12/2018			