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CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2017 JAN 24 PM 3:46

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

SSMP, LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

2221 Center Ave, St. Maries, ID 83861

(Street Address)

PO Box 702, St. Maries, ID 83861

(Mailing Address, if different)

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

Shari Porterfield

(Name)

2221 Center Ave, St. Maries, ID 83861

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:

Shari Porterfield

(Name)

PO Box 702, St. Maries, ID 83861

(Address)

Sherry Moore

(Name)

2368 St. Maries Ave, St. Maries, ID 83861

(Address)

(Name)

(Address)

(Name)

(Address)

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

PO Box 702, St. Maries, ID 83861

(Address)

Signature of organizer(s):

Signature:

Printed Name: Shari Porterfield

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

01/24/2017 05:00

CK:4514718 CT:172099 BH:1565500

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