

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

7013 JUN -5 AM II: 03

W	(Instructions on ba	(Instructions on back of application)	
1.	ne name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO
••	PAMS 3802 LLC	company is:	STATE OF IDAHO
2.	The complete street and mailing addresses of the initial designated office: 600 W. HUBBARD, UNIT 37, COEUR D'ALENE, ID 83814		
	(Street Address) PO BOX 3515, COEUR D'ALENE, ID (Malling Address, if different than street address		
3.	The name and complete street address of the registered agent:		
	PAULETTE ANN MITCHELL 600 W. HUBBARD, UNI		IT 37, CDA, ID 83816
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name PAULETTE A. MITCHELL, TRUSTEE	PO BOX 3515, COEUR	Address D'ALENE, ID 83816
	OF THE PAULETTE ANN MITCHELL		
	LIVING TRUST U/A 09/15/10		
5.	Mailing address for future corresp PO BOX 3515, COEUR D'ALENE, ID		notices):
6.	Future effective date of filing (optional):		
Sigr pers	nature of a manager, member son.		Secretary of State use only

Signature White Dr. Company Typed Name: MARY W. CUSACK, ESQ.

Signature___

Typed Name: _

IDAHO SECRETARY OF STATE

96/05/2013 05:00

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