



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2014 MAR -3 AM 9:31

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

River Quest Excursions, LLC

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

1523 Powers Ave., Lewiston, ID 83501

(Street Address)

(Mailing Address, if different than street address)

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

Alan W. Odegaard

(Name)

1523 Powers Ave., Lewiston, ID 83501

(Street Address)

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

Name

Address

Alan W. Odegaard

1523 Powers Ave., Lewiston, ID 83501

Debra L. Odegaard

1523 Powers Ave., Lewiston, ID 83501

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

1523 Powers Ave., Lewiston, ID 83501

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Alan W Odegaard

Signature

Typed Name: Debra L. Odegaard

Secretary of State use only

IDAHO SECRETARY OF STATE  
03/03/2014 05:00  
CK: 6475 CT: 293700 BH: 1413240  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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