



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

2018 FEB 15 AM 9:21

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Comini, 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:

807 Michigan Avenue, Orofino, Idaho 83544

(Street Address)

P.O. Box 2565 Orofino, Idaho 83544

(Mailing Address)

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

Pamela L. Comini

807 Michigan Ave., Orofino, ID 83544

(Name)

(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:

Pamela L. Comini

807 Michigan Ave., Orofino, ID 83544

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

IDAHO SECRETARY OF STATE

02/15/2018 05:00

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

P.O. Box 2565 Orofino, Idaho 83544

(Address)

CK:16561568 CT:172099 BH:1627035
10 20.00 = 20.00 EXPEDITE C #2

Signature of organizer(s).

Signature: _____

Printed Name: Pamela L. Comini

Signature: _____

Printed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

02/12/2018 05:00

CK:1375 CT:352694 BH:1626489
10 100.00 = 100.00 ORGAN LLC #2

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