## 251

Signature:\_

Rav. 08/2015

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(1)156448

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed SECRETARY OF STATE

Complete and submit the application in <u>duplic</u>	eate.
The name of the limited liability company is:	<u>-</u>
Sean P. Forrest, LLC	
(Remember to include the words "Limited Liability Company." "Li	rnited Company," or the abbreviations L.L.C., LLC, or LC)
The complete street and mailing addresses of the p	rincipal office is:
(Street Address)	
Horseshoe Bend, ID 83629	
(Mailing Address, if different)	
The name and complete street address of the regist	tered agent:
Sean Forrest 12 Spring Creek Dr	Horseshoe Bend ID 83629
(Name) (Address)	
The name and address of at least one governor of the	
	eek Dr., Horseshoe Bend, ID 83629
(Name) (Address)	
(Namo) (Address)	
(Name) (Address)	
(Name) (Address)	
Mailing address for future correspondence (annual i	report notices):
12 Spring Creek Dr., Horseshoe Bend, ID 83629	•
(Address)	
nature of organizer(s).	Secretary of State use only
nted Name: Sean P. Forrest	, i
P	}
nature: tovet	IDANO SECRETARY OF STATE
	09/21/2015 05:00 CK:319 CT:314827 BH:1493114
nted Name:	1@ 100.00 = 100.00 ORGAN LLC