

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

Ser.	(Instructions on ba	ck of application)	2013 OCT 10 AM 9: 26
1,		e name of the limited liability company is:	
2.	The complete street and mailing addresses of the initial designated office: 310 Reynolds Rd, Kingston, ID 83839  (Street Address) PO Box 327, Kingston, ID 83839  (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Jon Heiser (Name)	310 Reynolds Rd, Kingston, ID 83839 (Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
-	Name Jon Heiser	PO Box 194, Kingston, ID 83839 PO Box 194, Kingston, ID 83839	
	Lisa Fausett		
	Edward Anderson	PO Box 327, Kingston, ID 83839	
	Mailing address for future correspond PO Box 327, Kingston, ID 83839		es):
6. F	uture effective date of filing (option	nal):	
Sign:	ature of a manager, member or on.	authorized	
Signa	iture	Se	cretary of State use only
	Name: Edward Anderson		
Signa	ture		IDAHO SECRETARY OF STATE

10/10/2013 05:00 CK: 1133 CT: 265466 BH: 1393548 1 0 100.00 = 100.00 ORGAN LLC # 2

Typed Name: