

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

11 MAY 13 AM 8:41

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

C. Crist Enterprises LLC

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

5600 Country Estates Dr., Marsing, ID 83639

(Street Address)

(Mailing Address, if different than street address)

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

Carol Crist

(Name)

5600 Country Estates Dr., Marsing, ID 83639

(Street Address)

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

Name

Address

Carol Crist

5600 Country Estates Dr., Marsing, ID 83639

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

5600 Country Estates Dr., Marsing, ID 83639

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Carol Crist

Typed Name: Carol Crist

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
05/13/2011 05:00
CK: 2048 CT: 258774 BH: 1273563
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