

Signature de Con

Typed Name: Heidi S Ritter

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

LIMITED LIADIC	ok of application)
(Instructions on ba	ck of application)
The name of the limited liability c	SECRECARY OF STATE STATE OF IDAHO
_	STATE OF IDAHO
Uncorked L	<u> </u>
The complete street and mailing a	addresses of the initial designated/principal office:
(Street Address)	
5570 Huy 8	Deary Idaho 83823
(Mailing Address, if different than street address)
The name and complete street ad	Idress of the registered agent:
Tom DH.	
(Name)	S570 Hwy 8 (Street Address)
4. The name and address of at least	t one member or manager of the limited liability
company:	
Name T 2 U -	Address
Jeremy Kitter	5570 Huy 8 5570 Huy 8
Heidi Ritter	5570 Huy 8
5. Mailing address for future corresp	oondence (annual report notices):
→	Dear Idaho 83823
	7
6. Future effective date of filing (opti	ional):
Signature of a manager, member	or authorized
erson.	Secretary of State use only
ignatura / -	Source of State and Stray
signature Name Tage Pallar	
yped Name: <u>Jeremy Ritter</u>	

IDAHO SECRETARY OF STATE
10/08/2010 05:00
CK: 2272 CT: 251876 BH: 1242365
1 % 100.00 = 100.00 ORGAN LLC # 2

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