

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 MAR 15 AM 9: 18

SECTION			I i
CHEMARY OF	_		
SECRETARY OF STATE OF IDA	S	TAI	7
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 The name of the limited liability con 	npany is: STATE OF IDAHO
BLUE HE	RON ENTERPRISES, LLC
2. The complete street and mailing add	dresses of the initial designated/principal office:
187 Ren	ni Road, Sagle, ID 83860
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street addre	ess of the registered agent:
Stephen T. Snedden	708 Superior St. Ste. B Sandpoint, ID 83864
(rame)	(Street Address)
The name and address of at least on company: Name Corrine Cookman	e member or manager of the limited liability Address
	187 Remi Road, Sagle, ID 83860
-	
. Mailing address for future corresponde	
5. Mailing address for future corresponde	Pood Seria IP ages
. C. Tellin	Road, Sagle, ID 83860
Future effective date of filing (optional)	r
ignature of organizer(s). (An organizer is a me	ember, or is
ting in behalf of a member or members).	
gnature Corrine Cooking	Secretary of State use only
rped Name: Corrine Cookman	· .
gnature	IDAHO SECRETARY OF STATE 93/15/2010 95:00 CK: 6389 CT: 236676 BH: 1212619 1 8 160.90 = 160.60 ORDON LLC
ped Name:	CK: 6389 CT: 236676 BH: 1212619

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