

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2014 FEB 14 AM 9: 27 (Instructions on back of application)

SECRETARY	OFSIATE
STATE OF	MAKO IDAKO

1. The name of the limited liability com	nany ie:	OCUMENMY OF STATE STATE OF IDAHO
Teton Goats 11c	party is.	STATE OF IDAHO
2. The complete street and mailing add	resses of the initial dec	ignoted effice.
1690 Proudfoot Lane	Victor ID 8	ignated office: 2 <i>455</i>
(Street Address) P. O. BOX 771 Victor (Mailing Address, if different than street address)	, ID 83455	<u> </u>
3. The name and complete street addre	ess of the registered ag	ent:
Marianne Sturken (Name) Vanderpool	(Street Address)	Lane, Victor
The name and address of at least one company:	e member or manager	of the limited liability
Marianne Sturken Vanderpool	1690 Proudfoot L	ane; POBox 711, Vidor
5. Mailing address for future correspond P.O.Box 171, Victor,	ence (annual report no 1D 83455	tices):
6. Future effective date of filing (optional	I):	
Signature of a manager, member or a person.	uthorized	•
Signature Mara 2 Va	ea	Secretary of State use only
Typed Name: Marianne Sturk	en	

IDAHO SECRETARY OF STATE

@2/14/2014 05:00

CK: 2122 CT: 293083 BH: 1410713
1 2 100.00 = 188.00 ORSAN LLC # 2

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Vanderpool