



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 APR -5 AM 9:09

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Leaping Moose, LLC

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

4641 North River Hollow Drive, Ashton, Idaho 83420

(Street Address)

P.O. Box 155, Ashton, Idaho 83420

(Mailing Address, if different than street address)

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

Amanda D. Singer

(Name)

4641 North River Hollow Drive, Ashton, Idaho 83420

(Street Address)

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

Name

Address

Peter F. Singer

3384 Cedar Drive, Park City, Utah 84098

Amanda D. Singer

P.O. Box 155, Ashton, Idaho 83420

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

P.O. Box 155, Ashton, Idaho 83420

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

Signature of a manager, member or authorized person.

Signature Peter F. Singer
Typed Name: Peter F. Singer

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/05/2013 05:00
CK: 8778 CT: 136635 BH: 1368132
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