



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

FILED EFFECTIVE

2016 MAY -4 AM 8:43

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:
59 Escape Adventures L.L.C

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations L.L.C., LLC, or LC)

2. The complete street and mailing addresses of the principal office is:
4294 W Riverbend Ave., Post Falls, ID 83854

(Street Address)

1088 W. Cardinal Ave Hayden Idaho 83835

(Mailing Address, if different)

3. The name of the registered agent and the street address of the registered agent:
Alicia Zaas 1088 W. Cardinal Ave Hayden Idaho 83835

(Name)

(Address cannot be a post office box or postal mail box.)

4. The name and address of at least one governor of the limited liability company:
Alicia Zaas 1088 W. Cardinal Ave Hayden Idaho 83835

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):
1088 W. Cardinal Ave Hayden Idaho 83835

(Address)

Signature of organizer(s).

Signature:

Alicia Zaas

Printed Name: Alicia Zaas

Signature:

Alicia Zaas

Alicia Zaas

Printed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE

05/04/2016 05:00

CK:5262 CT:323978 BH:1526755

1@ 100.00 = 100.00 ORGAN LLC #2

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