

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

	(Instructions on back	c of application	n) 2013 APR -3 AM 8:4-7
1.	The name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO e initial designated office:
	Schofield Design LLC		STATE OF IDAMOS
2. The complete street and mailing addresses of the initial designated office			e initial designated office:
	711 Hale Road, Weiser, ID 83672		
	(Street Address)	_	
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
-	Christopher Schofield	711 Hale Roa	d, Weiser, ID 83672
	(Name)	(Street Address	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		Address
	Christopher Schofield	711 Hale Roa	d, Weiser, ID 83672
	Sharolyn Schofield	711 Hale Roa	d, Weiser, ID 83672
	19 to the second of the second		
			The state of the s
5 .	Mailing address for future correspondence (annual report notices):		
	711 Hale Road, Weiser, ID 83672		
6.	Future effective date of filing (optional):		
Sig per:	nature of a manager, member or	authorized	
•		İ	Secretary of State use only
	nature		
Тур	ed Name: Christopher Schofield		် အက်ောင်း မြန်မာ့ရှေ့ကျ
Sia	nature)	IDAHO SECRETARY OF STATE
_	ed Name: Sharolyn Schofjeld		04/03/2013 05:00 CK: 6552 CT: 281455 BH: 1367789 1

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