

FILED EFFECTIVE



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

12-17-12 10:27

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

PDF LLC

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

11805 NUNN RD, ATHOL, ID 83801

(Street Address)

(Mailing Address, if different than street address)

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

SUZANNE GIVENS

(Name)

881 E NORTHWOOD CT, HAYDEN, ID 83835

(Street Address)

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

NameAddress

SUZANNE GIVENS

881 E NORTHWOOD CT

HAYDEN, ID 83835

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

11805 NUNN RD, ATHOL, ID 83801

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: SUZANNE GIVENS

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
04/06/2012 05:00  
CK: 604566 CT: 269013 BH: 1318715  
1 @ 100.00 = 100.00 ORGAN LLC # 2

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