



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2013 JUN 24 AM 9:30

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Lewiston Outfitting Company, LLC

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

827-829 D Street, Lewiston, ID 83501

(Street Address)

P. O. Box 1903, Lewiston, ID 83501

(Mailing Address, if different than street address)

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

Janice L. Buck

(Name)

1026 Main Street, Lewiston, ID 83501

(Street Address)

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

Name

Address

David C. Howell

29978 Thiessen Road, Lewiston, ID 83501

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

P. O. Box 1903, Lewiston, ID 83501

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

Signature of a manager, member or authorized person.

Signature _____

Typed Name: David C. Howell, Member

Secretary of State use only

Signature _____

Typed Name: _____

IDAHO SECRETARY OF STATE
06/24/2013 05:00
CK: 5543 CT: 257917 BH: 1379367
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