

Typed Name: ___

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 69 (72) -6 Mil 8:35

(Instructions on back of application)

•	STATE OF DAHO
The name of the limited liability cor	mpany is:
c	Prossler Building LLC
The complete street and mailing ad	dresses of the initial designated/principal office:
_	204 So. Main Street
(Street Address)	loscow, Idaho 83843
(Mailing Address, if different than street address)	ioscow, idano cooro
The name and complete street add	ress of the registered agent:
Mark Loaiza	1561 Randall Flat Road, Troy, Idaho 83871
(Name)	(Street Address)
company:	one member or manager of the limited liability
Name Mark Loaiza	Address 1501 Rendoll Flot Rend Tree Ideba 92971
	1561 Randall Flat Road, Troy, Idaho 83871
Deborah Loaiza	1561 Randall Flat Road, Troy, Idaho 83871
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Mailing address for future correspor	ndence (annual report notices):
204 So. Mair	n Street, Moscow, Idaho 83843
*	
Future effective date of filing (option	nal):
gnature of organizer(s). (An organizer is a ting in behalf of a member or members).	a member, or is
ing in behalf of a member of members).	Secretary of State use only
gnature Wall Hai	
ped Name: Mark Loaiza	le l
gnature Sweet Louis	IDAHO SECRETARY OF GEVEN CITY

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