

FILED EFFECTIVE

251

2012 NOV 21 PM 12 12

**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

SAVAGE LAKE CABIN, L.L.C.

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

315 S. Almon, Moscow, ID 83843

(Street Address)

(Mailing Address, if different than street address)

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

DAVID E. JONES
(Name)315 S. Almon, Moscow, ID 83843
(Street Address)

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

DAVID W. SAVAGE

Name

Address

640 SE CRESTVIEW, PULLMAN, WA 99163

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

640 SW CRESTVIEW, PULLMAN, WA 99163

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

Signature of a manager, member or authorized
person.

Signature _____

Typed Name: DAVID W. SAVAGE

Secretary of State use only

Signature _____

Typed Name: _____

02/02/2012

Cor_Lic_B6 Rev. 07/2010

IDaho SECRETARY OF STATE
11/21/2012 05:00
CK: NONE CT: 3048 BH: 1348546
1 @ 100.00 = 100.00 ORGAN LLC # 2
1 @ 20.00 = 20.00 EXPEDITE C # 3

W119206