

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 AUG 11 AM 10: 01

T TO	(Instructions on back	of application)	SECRETA	RY OF STATE
1. The nam	e of the limited liability com	npany is:	SIALE	OF IDAHO
	J	ack R. Kohler LLC		
2. The com	plete street and mailing add	resses of the initial	designated/princi	pal office:
	22395 Hoskir	ns Rd., Caldwell, Idaho	83607	
(Street Add	ress)	-		
(Mailing Ad	dress, if different than street address)			
3. The nam	e and complete street addr	ess of the registere	d agent:	
	Jack R. Kohler	22395 Hoskin	s Rd., Caldwell, Idaho	83607
(Name)		(Street Address)		
4. The nam company	e and address of at least or f: Name	ne member or man	Address	liability
	Jack R. Kohler	22395 Hoskin	s Rd., Caldwell, Idaho	83607

			•	
5. Mailing a	address for future correspon	•	•	** .
	22395 Hoski	ns Rd., Caldwell, Idaho	83607	
.		_H.		* .
6. Future e	ffective date of filing (option	al):		<u> </u>
0 1			•	
_	Organizer(s) . (An organizer is a i of a member or members).	member, or is		
-		9	Secretary of State	use only
Signature	Jack R. Kohler			7. · · · · · · · · · · · · · · · · · · ·
Typed Name	Jack R. Kohler			
-		Pos Parinte	199HU SE 08/11/	CRETARY OF STATE
Signature		formskil.C formshoer org. in. PMD	CK: CASH CT: 1 @ 188.88 =	239575 BH: 1188426 108.00 ORGAN LLC #
Typed Name		forme		

W86067