

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY

(Instructions on back of application)

II MAY 19 AM II: II

1. The name of the limited liability co	mpany is: SECRETARY OF STATE  STATE OF IDAHO
BLU	JE EYED FOXES L.L.C.
2. The complete street and mailing ac 24651 Middle Rd, Wilder, ld 83676	ddresses of the initial designated/principal office:
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street add	fress of the registered agent:
All day \$49 Idaho registered Agent	1011 N 11th Coeur d Alene ID 83814
(Name)	(Street Address)
The name and address of at least company:	one member or manager of the limited liability
<u>Name</u>	Address
Troy Butler	24651 Middle Rd. Wilder ID 83676
Tracey Butler	24651 Middle Rd. Wilder ID 83676
Bruce Butler	405 5th st. Wilder, ID 83676
5. Mailing address for future correspo	ondence (annual report notices):
24651 Middle Rd. Wilder ID 83676	
6. Future effective date of filing (optio	onal):
Signature of a manager, member of	r authorized
person.	Secretary of State use only
Signature Trust Butter	
Typed Name: TROY BUTLER	
Cianatura	
Signature	05/19/2011 05:00
Typed Name:	CK: CASH CT: 254374 BH: 1274463 1 0 180.60 = 166.60 ORSAN LLC # 2

cert\_org\_lic Rev. 07/2010

W103462