

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 08 SEP 19 AM 8: 58

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited liability compar	ny is:
	SSTEK, L.L.C.
2. The complete street and mailing addres	ses of the initial designated/principal office:
71 REVEILLE LANE,	SANDPOINT, IDAHO 83864
(Street Address)	
(Mailing Address, if different than street address)	
3. The name and complete street address	of the registered agent:
NANCY I. ANDREWS	71 REVEILLE LANE, SANDPOINT, ID 83864
(St	reet Address)
 The name and address of at least one m company: 	nember or manager of the limited liability
<u>Name</u>	<u>Address</u>
NANCY I. ANDREWS	71 REVEILLE LANE, SANDPOINT, ID 83864
KIMBERLY K. CARLSON	139 HEATH LAKE RAOD, SAGLE, ID 83860
. Mailing address for future correspondence	,
and and the lattic collespondence	e (annual report notices):
THE VEILLE DAME	E, SANDPOINT, ID 83864
. Future effective date of filing (optional): _	
gnature of organizer(s). (An organizer is a memb ting in behalf of a member or members).	per, or is
	Secretary of State use only
gnature <u>manay andreu</u>	IDAHO SECRETARY OF STATE ##################################
ped Name: NANCY I. ANDREWS	
1/1/1/11	overno 8000
gnature . / al	IDAHO SECRETARY OF STATE 9/19/2008 05:0
ped Name: KIMBERLY K. CARLSON	CK: 11673 CT: 28218 BH: 1136