

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

<b>1</b>	(Instructions on back of	of application)	2013 MAR - 7 AM 9: 19
1.	The name of the limited liability compared the market work compared to the limited liability compared to the liability compared	,	SEGNA DAN DA SVATE STATE (SEDDENO
2	<del> </del>	rocco of the initial	designated office:
۷.	The complete street and mailing addresses of the initial designated office:  19962 W RIVERVIEW DR		
	(Street Address)		
	POST FALLS, ID 83854 (Mailing Address, if different than street address)		
3.	The name and complete street addre	ess of the registered	d agent:
	KEVIN BETTIS	19962 W RIVERVIEV	V, POST FALLS , ID 83854
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name		Address
	KEVIN BETTIS	19962 W RIVERVIEV	V, POST FALLS, ID 83854
<b>5</b> .	Mailing address for future correspond	dence (annual repo	ort notices):
5.	Mailing address for future correspond	dence (annual repo	ort notices):
	, ,		,
6. Sig	Future effective date of filing (optional nature of a manager, member or	al):	,
6. Sig	Future effective date of filing (optional nature of a manager, member or a son.	al): authorized	<u>,                                      </u>
Sig per Sig	Future effective date of filing (optional nature of a manager, member or	al): authorized	· · · · · · · · · · · · · · · · · · ·
6. Sig Sig Ty	Future effective date of filing (optional nature of a manager, member or a son.  Inature M. Seed Name: KEVIN BETTIS	al):authorized	· · · · · · · · · · · · · · · · · · ·
6. Sig Sig Ty <sub>l</sub>	Future effective date of filing (options nature of a manager, member or son.	al):authorized	· · · · · · · · · · · · · · · · · · ·

9/21/2012

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