

CERTIFICATE OF ORGANIZATION (1)

LIMITED LIAE	BILITY COMPANY 🎨 🔧 🚜 💆
(Instructions or	BILITY COMPANY STATE OF SAME STATE OF SAME STATE OF SAME STATE OF SAME SAME SAME SAME SAME SAME SAME SAME
1. The name of the limited liabil	ity company is:
	Delsey, LLC
2. The complete street and maili 3153 W Yukon Ave, Post Falls, ID (Street Address)	ing addresses of the initial designated/principal office: 83854
(Mailing Address, if different than street ac	ddress)
3. The name and complete stree	et address of the registered agent:
Cheryl Mossburgh	3153 W Yukon Ave, Post Falls, ID 83854
(Name)	(Street Address)
The name and address of at I company:	east one member or manager of the limited liability
<u>Name</u>	Address
Floyd Mossburgh	3153 W Yukon Ave, Post Falls, ID 83854
Cheryl Mossburgh	3153 W Yukon Ave, Post Falls, ID 83854
5. Mailing address for future cor	respondence (annual report notices):
3153 W Yukon Ave, Post Falls, ID	
6. Future effective date of filing	(optional):
Signature of a manager, memberson.	per or authorized
Ae .	Secretary of State use only
Signature They & Mont	myl
Typed Name: Floyd Mossburgh, Mbi	r/Mgr
Signature <u>CHERY Mossbar</u> Typed Name: Cheryl Mossburgh, M	1DANO SECRETARY OF STATE 09/13/2012 05:00
Typed Name: Cheryl Mossburgh, M	CK: 4231 CT: 274284 BH: 1339651 1 @ 100.80 = 180.00 ORGAN LLC # 2

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