

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

2013 MAY 14 - AM 8: 45

4	(Instructions on back	of application)	20131101 17 1111
1.	The name of the limited liability cor	npany is:	SECRE WAY OF STATE STATE OF IDAHO
2.	The complete street and mailing addresses of the initial designated office: 243 W Sunset Avenue		
	(Street Address) Coeur d'Alene, ID 83815 (Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Robert R. Chatters	243 W Sunset Avenue, Coeur d'Alene, ID 83815	
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name Steve Godde	Address 8539 West Avenue H, Lancaster, CA 93536	
	Margaret Godde	1581 Orchard Rd, Gardnerville, NV 89410	
5.	Mailing address for future correspor	-	•
6.	Future effective date of filing (option	al):	
	nature of a manager, member or son.	authorized	
•	nature My (ms Mms		Secretary of State use only
Тур	ed Name: Hames Magnuson, Attorney	<u>'</u>	
Sigi	nature		IDAHO SECRETARY OF STATE 11/14/2013 05:00

CK: 24461 CT: 6160 BH: 1398030 1 0 100.00 = 100.00 ORGAN LLC # 2

W131141

Typed Name: \_\_\_\_