

Typed Name: __

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 JAN 26 AM 10: 09

1.	The name of the limited liability company is:	SECRETARY OF STATE STATE OF IDAHO	
	Woody's Outdoor Solution	S LLCSFCRETARY	
2. The complete street and mailing addresses of the initial designated of STATE		initial designated of RE:IDAHO	
	30433 South Chester Drive		
	(Street Address) Harrison, 10 83833		
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Mitchell Kohn Wool 30433 S (Name) (Street Address)	Chister Or Harrison 10 8383	
4.	. The name and address of at least one member or manager of the limited liability company:		
Name Address			
	Mitchell Kohn Wood 30433 S Chester Dr		
	Harriso	n. 10 83833	
	·	<u> </u>	
5. Mailing address for future correspondence (annual report notices):		\ \alpha' == =	
	30433 S Chester Or Har	vison 10 83833	
6.	6. Future effective date of filing (optional):		
	The state of mind tobusiness, a title		
Sig	nature of a manager, member or authorized		
_	son.	Secretary of State use only	
Sia-	IDANO SECRETARY OF STATE		
_	ed Name: Mitchett Wood	01/26/2015 05:00 CK:1028 CT:305106 BH:1458586	
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