



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

09 APR 22 AM 8:24

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Mountain Mist, LLC

2. The complete street and mailing addresses of the initial designated/principal office:

1042 West 7th South Rexburg Idaho 83440
(Street Address)

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

Lisa Ellis
(Name)

Same
(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Lisa Ellis
Name

Same
Address

5. Mailing address for future correspondence (annual report notices):

Same

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature Lisa Ellis

Typed Name: Lisa Ellis

Signature _____

Typed Name: _____

Secretary of State use only

g:\corpforms\LLC format\cert_org_llc.PMD
Revised 07/2008

IDAHO SECRETARY OF STATE
04/22/2009 05:00
CK: 11056 CT: 236382 IN: 1167057
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