

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

OF F	(Instructions on bac	ck of application)	2013 MAN 14 AM 9: 19
1.	1. The name of the limited liability company is: Craig Adams, LLC		SECRETARY OF STATE STATE OF IDAHO
2.	The complete street and mailing addresses of the initial designated office: 101 E Borah Ave. Coeur d'Alene, ID 83814-3617 (Street Address)		
	(Mailing Address, if different than street address))	<u> </u>
3.	The name and complete street address of the registered agent:		
	Craig Adams	101 E Borah Ave, Coeur d'Alene, ID 83814-3617	
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	<u>Name</u>		Address
	Craig Adams	101 E Boran Ave	e, Coeur d'Alene, ID 83814-3617
5.	Mailing address for future corresp 605 E 6th Ave., Post Fal	•	report notices):
6.	Future effective date of filing (option	onal):	
_	nature of a manager, member of son.	or authorized	
·	nature O		Secretary of State use only
Тур	ed Name: Craig Adams		
	nature ed Name:		IDAHO SECRETARY OF STATE ### ### ### ### ### ################

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