



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE
10/17/12 10:13

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

OWEN DRAWS, LLC

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

110 N ANGELA DR HAILEY, IDAHO 83333
(Street Address)

(Mailing Address, if different than street address)

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

OWEN SCANLON
(Name)

110 N ANGELA DR HAILEY, ID
(Street Address) 83333

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

Name	Address
<u>OWEN SCANLON</u>	<u>110 N ANGELA DR HAILEY, ID</u> <u>83333</u>
_____	_____
_____	_____
_____	_____
_____	_____

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

SEE ABOVE

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature [Signature]
Typed Name: OWEN W SCANLON

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
04/16/2012 05:00
CK: 2458 CT: 251306 BH: 1320039
1 @ 100.00 = 100.00 ORGAN LLC # 2