



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JUL -7 AM 8:10

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Dakota, LLC

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

2614 Indian Trail, Twin Falls, ID 83301

(Street Address)

(Mailing Address, if different than street address)

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

Rick Tegan

2614 Indian Trail, Twin Falls, ID 83301

(Name)

(Street Address)

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

Name

Rick Tegan

Address

2614 Indian Trail, Twin Falls, ID 83301

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

2614 Indian Trail, Twin Falls, ID 83301

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 _____

Typed Name: _____ Rick Tegan

Signature _____

Typed Name: _____

Secretary of State use only

LLC form part org. fil. per
07/07/2009
Revised 07/2008

IDAHO SECRETARY OF STATE
07/07/2009 05:00
CK: 3769 CT: 206593 BH: 1177758
1 + 100.00 = 100.00 DRCBN LLC # 2

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