

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

08 OCT 14 AM 9: 28

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited liabili	y company is: STATE OF IDAHO
	Adventure Airlines LLC
	g addresses of the initial designated/principal office: Cartwright Road, Boise, Idaho 83714
(Street Address)	
(Mailing Address, if different than street add	ress)
3. The name and complete stree	address of the registered agent:
T E Terteling	5115 Cartwright Road, Boise, Idaho 83714
(Name)	(Street Address)
4. The name and address of at le company:	ast one member or manager of the limited liability
Name	Address
T E Terteling	5115 Cartwright Road, Boise, Idaho 83714
$(x_{ij}) \in H_{ij}$	
<del> </del>	
•	spondence (annual report notices):
5115 (	Cartwright Road, Boise, Idaho 83714
C. Future official data of filling /	
6. Future effective date of filing (	ptional):
Signature of organizer(s). (An organizering in behalf of a member or members	
acting in behalf of a member of members	Secretary of State use only
Signature	
Typed Name: TE Tertel	ng g
	80 80 80 80 80 80 80 80 80 80 80 80 80 8
Signature	1 1 196.88 = 189.80 ORGAN LLC **
Typed Name:	CK: 1397 CT: 111206 BH: 1139945

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