FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 2012 DEC 13 AM IO: 38

			44 M: 38
	(Instructions on I	back of application)	SECRETARY OF STATE
1. The na	me of the limited liability	/ company is:	STATE OF IDAHO
	g Hole LLC	•	
2. The co	mplete street and mailing	g addresses of the initial o	designated office:
5747	Montana Hwy. 91 S., Dillon, N	Montana 59725	•
(Street A	Address)		
(Mailing	Address, if different than street addre	963)	
3. The na	me and complete street	address of the registered	agent:
Stephe	en E. Martin	425 S. Holmes Avenue	, Idaho Falis, Idaho 83401
(Name)	-	(Street Address)	7 (44110 1 6410 6640 1
John E	Name irb	540 Skyline Drive, Dillo	Address n, MT 59725
	7884		***
	Val.		
<u> </u>	<u> </u>		
5 Mailina	address for future correct	enondenes (senuelt	and Alban N
P.O. B	ox 3189, Idaho Falls, Idaho 83	spondence (annual report 1403	notices);
		****	-
6. Future	effective date of filing (op	tional):	
ignatu r e (erson.	of a manager, member	or authorized	
	2,7	1	Secretary of State use only
ignature_	Shyle M		
yped Nam	e: Stephen E. Martin, Organ	izer	
ianatura	-		
ignature_			

CK: NONE CT: 113824 BH: 1351191 1 @ 100.00 = 100.00 ORGAN LLC # 2 1 @ 20.00 = 26.00 EXPEDITE C # 3