

Typed Name: \_\_\_\_

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 JUN 29 AM 8: 54

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited liability con	mpany is: STATE OF IDAHO
Sh	epro Enterprises, LLC
-	Idresses of the initial designated/principal office:
	3000 W., Tetonia, ID 83452
(Street Address)	Same
(Mailing Address, If different than street address)	
3. The name and complete street add	ress of the registered agent:
Steve Shepro	3957 N. 3000 W., Tetonia, ID 83452
(Name)	(Street Address)
company:  Name  Steve Shepro	one member or manager of the limited liability  Address  3957 N. 3000 W., Tetonia, ID 83452
0.0000	
La Company Comments	
of Alberta Control of the Control of	
-	
5. Mailing address for future correspo	ndence (annual report notices):
_	3000 W., Tetonia, ID 83452
	2
6. Future effective date of filing (option	nal):
Signature of organizer(s). (An organizer is acting in behalf of a member or members).	a member, or is
ability in perial of a monitor of membersy.	Secretary of State use only
Signature The State of the Stat	
Typed Name: Steve Shepro	
والمراجع والمتعارض والمتعا	IDAHO SECRETARY OF STATE
Signature	96/29/PARG STATE



