



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2014 AUG -6 AM 8:00

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Lindy Lewis, LLC

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

521 N. Fourth Ave. Sandpoint, ID 83864
(Street Address)

PO Box 73 Sandpoint, ID 83864
(Mailing Address, if different than street address)

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

Lindalyn Ann Lewis 60 Bella Circle Sagle, ID
(Name) (Street Address) 83860

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

Name

Address

Lindalyn Ann Lewis 60 Bella Circle Sagle, ID 83860

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

PO Box 73 Sandpoint, ID 83864

6. Future effective date of filing (optional):

IDAHO SECRETARY OF STATE

08/06/2014 05:00

CK:1054 CT:291184 BH:1436202

1@ 100.00 = 100.00 ORGAN LLC #2

Signature of a manager, member or authorized person.

Signature Lindalyn Lewis

Typed Name: Lindalyn Lewis

Signature _____

Typed Name: _____

Secretary of State use only

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