



CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2014 JAN 23 AM 9:07

(Instructions on back of application)

 SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Strongline Logging LLC

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

535 State Ave. Oldtown ID 83822

(Street Address)

P.O. Box 3613 Oldtown ID 83822

(Mailing Address, if different than street address)

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

Clay Strong

(Name)

535 State Ave. Oldtown ID 83822

(Street Address)

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

Name

Address

Marjorie Strong

535 State Ave. Oldtown ID 83822

phone # 509 630 0596

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

☒ P.O. Box 3613 Oldtown ID 83822

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature Clay Strong

Typed Name: Clay Strong

Signature Marjorie Strong

Typed Name: Marjorie Strong

Secretary of State use only

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