

Printed Name:

Signature: \_\_\_\_

Rev. 07/2015

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code Base Filing fee: \$100.00.

Complete and submit the application in duplicate

SECHÉTARY OF STATE STATE OF IDAHO

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D.K.W. Ventures, LLC (Remember to include the wo	rds "Limited Liability Company" "Limited Company).	for the abbreviations L.L.C.	. LLC. or t	C)	
The complete street and ma	iling addresses of the principal office	ce is:			
950 Alder Creek Road		Garden Valley	, ID	83622	
(Street Address)		(City)	(State)	(2	Zipcode)
P.O. Box 4		Garden Valley	_ID	_83	622_
(Mailing Address, if different)		(City)	(State)	(2	Zipcode)
The name and complete stre	eet address of the registered agent	:			
Donald K. Weilmunster	950 Alder Creek Road	Garden '	Valley	ID	83622
Name)	(Address)	(City)		tate)	(Zipcode)
The name and address of at Donald K. Weilmunster	P.O. Box 4  (Address)	ability company: Garden \ (City)		ID tate)	<b>83622</b> (Zipcode)
Donald K. Weilmunster	P.O. Box 4	Garden \	(S		83622 (Zipcode)
Donald K. Weilmunster (Name)	P.O. Box 4 (Address)	Garden (City)	(S	tate)	(Zipcode)
Donald K. Weilmunster (Name) (Name)	P.O. Box 4 (Address) (Address)	Garden (City)	(S (S	tate) State)	(Zipcode) (Zipcode
Donald K. Weilmunster (Name) (Name) (Name)	P.O. Box 4 (Address)  (Address)	Garden (City)  (City)	(S (S	state)	(Zipcode (Zipcode (Zipcode
Donald K. Weilmunster (Name) (Name) (Name)	P.O. Box 4 (Address)  (Address)  (Address)	Garden (City)  (City)	(S (S	State) State)	(Zipcode (Zipcode (Zipcode
Donald K. Weilmunster (Name) (Name) (Name) (Name)  Mailing address for future co	P.O. Box 4 (Address)  (Address)  (Address)	Garden (City) (City) (City)	(S (S	State)  State)	(Zipcode (Zipcode (Zipcode
Donald K. Weilmunster (Name) (Name) (Name)  Mailing address for future co	P.O. Box 4 (Address)  (Address)  (Address)	Garden V (City) (City) (City) es): Garden Va	(S (S (S (State	State)  State)	(Zipcode (Zipcode

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