



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2012 DEC -3 AM 9:58

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Zephyr Snow and Ice Melt, LLC

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

501 6th Street, Filer, ID 83328

(Street Address)

P.O. Box 29, Filer, ID 83328

(Mailing Address, if different than street address)

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

Robert S. Fort

(Name)

501 6th Street, Filer, ID 83328

(Street Address)

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

**Name**

**Address**

Robert S. Fort

P.O. Box 29, Filer, ID 83328

Carol S. Fort

P.O. Box 29, Filer, ID 83328

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

P.O. Box 29, Filer, ID 83328

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature *x Robert S Fort*

Typed Name: Robert S. Fort

Signature *x Carol S Fort*

Typed Name: Carol S. Fort

Secretary of State use only

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12/03/2012 05:00  
CK: 1568 CT: 276764 BH: 1349599  
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