

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2012 MAR 12 AM 9: 24

. The name of the limited liab	ility company is:	SECRETAIN OF STATE	
. The complete street and mai 1088 N Little Camas Avenue, Sta	•	e initial designated office:	
(Street Address) same			
(Mailing Address, if different than street a	address)		
The name and complete stre	et address of the re	gistered agent:	
Toni E Turner	1088 N Little	1088 N Little Camas Avenue, Star, Idaho 83669	
(Name)	(Street Address	(Street Address)	
. The name and address of at company:	least one member of	or manager of the limited liability	
<u>Name</u>		<u>Address</u>	
Toni E Turner	1088 N Little	Camas Avenue, Star, Idaho 83669	
			
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Maritim and describe for Entress		al according to	
. Mailing address for future co		ai report notices):	
1088 N Little Camas Avenue, Sta	ır, Idano, 63669		
. Future effective date of filing	(ontional):		
. 7 diale checave date of hing	(optional).		
gnature of a manager, mem	her or authorized		
erson.	1		
		Secretary of State use only	
gnature <u>four La M</u> /ped Name: <u>TONI E TU</u>	iner_		
ped Name: <u>70NI E 70</u>	IKNIEK		
anatura		IDAHO SECRETARY OF STATE 03/12/2012 05:00	
gnature /ped Name:	······································	CK: 6537 CT: 268020 BH: 1314607 1 @ 100.00 = 100.00 ORGAN LLC # 2	
/DEG NAME			

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