

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 DEC 23 PM 3: 07

•	
. The name of the limited liability of	company is: STATE OF IDAI
·	WLC LLC
The complete street and mailing a	addresses of the initial designated/principal office:
(Street Address) Meridian, ID 83646	
(Mailing Address, if different than street address	s)
The name and complete street ac	ddress of the registered agent:
Lora Callister	2881 N Spring Water St, Meridian, ID 83646
(Name)	(Street Address)
The name and address of at leas company:	t one member or manager of the limited liability
<u>Name</u>	<u>Address</u>
Wayne Callister	2881 N Spring Water St, Meridian, ID 83646
Mailing address for future corresp 55 W Willöbrook Dr # 103, Meridian, ID	•
Future effective date of filing (opti	ional):
gnature of a manager, member	or authorized
rson.	Secretary of State use only
gnature <u>Vayva</u> Calla	
ped Name: Wayne Callister	
	TRAUD CEPPETABLY DE CTATE

IDAHO SECRETARY OF STATE

12/23/2010 05:00

CK: 2198 CT: 253768 BH: 1252330

1 8 100.06 = 108.08 ORGAN LLC # 2

Signature\_\_\_\_\_

Typed Name: