



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

08 DEC -8 AM 8:57
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Kodiak Arms, LLC

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

6182 Lapwai Road, Lewiston, Idaho 83501

(Street Address)

(Mailing Address, if different than street address)

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

Marvin Albright

(Name)

6182 Lapwai Road, Lewiston, ID 83501

(Street Address)

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

Name

Address

Marvin Albright

6182 Lapwai Road, Lewiston, ID 83501

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

6182 Lapwai Road, Lewiston, ID 83501

6. Future effective date of filing (optional):

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Typed Name: Marvin Albright

Signature

Typed Name:

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
12/08/2008 05:00
CK: 7397 CT: 9686 BH: 1147258
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FILED EFFECTIVE