



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

10 FEB 19 AM 8:54

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Adventure Quest, LLC

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

18110 S. Cloverdale Rd., Kuna, ID 83634

(Street Address)

(Mailing Address, if different than street address)

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

Crista Vesel

(Name)

18110 S. Cloverdale Rd., Kuna, ID 83634

(Street Address)

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

**Name**

Crista Vesel

**Address**

18110 S. Cloverdale Rd., Kuna, ID 83634

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

18110 S. Cloverdale Rd., Kuna, ID 83634

6. Future effective date of filing (optional):

n/a

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

Signature

Crista Vesel

Typed Name:

Crista Vesel

Signature

Typed Name:

Secretary of State use only

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