

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015	JAN	-2		9:	00
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The cause for the property		= 5/4 + 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
. The name of the limited liabilit	ty company is:	STATE OF SUPPORT	
Open Season Cafe & Grill, LLC		•	
2. The complete street and mailir 018 N. Main, Kooskia, ID 83539 (Street Address) PO Box 522, Kamiah, ID 83536 (Mailing Address, if different than street add		al designated office:	
. The name and complete street	t address of the register	ed agent:	
Kathleen Lester	11160 Bass Lane, C	Caldwell, ID 83605	
(Nате)	(Street Address)		
The name and address of at le company:	east one member or mar	nager of the limited liability	
Name Kathleen Lester	DA D 600 17 11	Address PO Box 522, Kamiah, ID 83536	
. Mailing address for future corre PO Box 522, Kamiah, ID 83536	espondence (annual rep	ort notices):	
		ort notices):	
PO Box 522, Kamiah, ID 83536 Future effective date of filing (displaying the second s	optional):	ort notices):	
PO Box 522, Kamiah, ID 83536 Future effective date of filing (d	optional):	oort notices): Secretary of State use only	
PO Box 522, Kamiah, ID 83536 Future effective date of filing (displaying the second s	optional):		

W146019

10 100.00 = 100.00 ORGAN LLC #2

Signature_____

Typed Name: _____