

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY 10 JUL 28 PM 1: 30

Signature Bannie Beard
Typed Name: BONNIE Beard

PEROPOSITION OF STATE

TE &	(Instructions on back of application) SECHAL OF IDAHO
1.	The name of the limited liability company is:
	North Country StorE LLC
2.	The complete street and mailing addresses of the initial designated/principal office:
	6170 S. MAIN STREET TETONIA, Id
	(Street Address) O. Box 5 Teton: A Id 83452 (Mailing Address, if different than street address)
	(Mailing Address, if different than street address)
3.	The name and complete street address of the registered agent:
	BONNIE BEARD 10530 N HWY32 Tetonia, (Street Address) TD 8342
	(Name) (Street Address) TO 8342
	The same and address of at least one member or manager of the limited liability
4.	The name and address of at least one member or manager of the limited liability company:
	· · ·
	Mitch BEARD P.O. BOX5 TetoNiA Id 83452 BONNIE BEARD P.O. BOX 5 TetoNiA, Id 83452
	BONNIE BEARD P.O. BOX 5 TetONIA, Id 83452
.	NA : I'm a dda a far fatura agreemendanas (annual roport noticos):
5.	Mailing address for future correspondence (annual report notices): P.O. Box 5 Tetonia, Id 83452
	1.0. DOX S TETONIA, TO BOLLEY
6.	Future effective date of filing (optional):
Signature of a manager, member or authorized	
•	Secretary of State use only
Sig	ped Name: Mitch Beard Thomas Serbetary of State
Туј	ped Name: Mitch Beard

cert_org_lic Rev. 07/2010

CK: 18063929796 CT: 249977 BH: 1232548 1 8 106.08 = 100.00 ORGAN LLC # 2 1 8 20.08 = 20.00 EXPEDITE C # 3

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