

Typed Name: \_\_\_

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 MAY 26 AM 8: 29

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

<ol> <li>The name of the limited liability co</li> </ol>	mpany is:
S.S. 8	K. ENTERPRISES, LLC
2. The complete street and mailing ac	ddresses of the initial designated/principal office:
•	TREET, SANDPOINT, IDAHO 83864
(Street Address) P.O. BOX 2028, SANDPOINT, IDAHO 83864	
(Mailing Address, if different than street address)	
3. The name and complete street add	Iress of the registered agent:
SYDNEY L. GUTIERREZ	317 CHURCH STREET, SANDPOINT, ID 83864
(Name)	(Street Address)
the contract of the contract o	one member or manager of the limited liability
company: Name	Address
STEVEN PITTS	P.O. BOX 1030, SPIRIT LAKE, ID 83869
STEPHANIE PITTS	P.O. BOX 1030, SPIRIT LAKE, ID 83869
	7.0. 50% 1000, 01 1111 5 112, 15 0000
5. Mailing address for future correspo	
P.O. BOX 20	28, SANDPOINT, IDAHO 83864
	10
6. Future effective date of filing (option	9ai):
Signature of organizer(s). (An organizer is	a member, or is
acting in behalf of a/member or members).	Secretary of State use only
Signature	No. 1 of the second sec
Typed Name: SYDNEY L. GUTIERI	REZ 5
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	IDAHO SECRETARY OF STATE
Signature	IDAHO SECRETARY OF STATE  ### 55/26/2009 95 # 600  CK: 266 CT: 66460 BH: 1171743

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