

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 JUN 22 AM 9: 19

1. The name of the limited liability company is:

SECRETARY OF STATE STATE OF IDAHO

Duane Persoon (Name) The name and address of at least one member or manager of the limited company: Name Duane Persoon Roberta Persoon Mailing address for future correspondence (annual report notices): 1525 Airway Ave., Lewiston, ID 83 Mailing address for future correspondence (annual report notices): 1525 Airway Ave., Lewiston, ID 83501 Future effective date of filing (optional): nature of organizer(s). (An organizer is a member, or is ig in behalf of a member or members).	. 01 10/1
(Street Address) (Mailing Address, if different than street address) The name and complete street address of the registered agent: Duane Persoon 1525 Airway Ave., Lewiston, ID 8: (Street Address) The name and address of at least one member or manager of the limited company: Name Duane Persoon 1525 Airway Ave., Lewiston, ID 8: Roberta Persoon 1525 Airway Ave., Lewiston, ID 8: Mailing address for future correspondence (annual report notices): 1525 Airway Ave., Lewiston, ID 8: Mailing address for future correspondence (annual report notices): 1525 Airway Ave., Lewiston, ID 8: Puture effective date of filing (optional): mature of organizer(s). (An organizer is a member, or is gin behelf of a member or members).	
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