

## CERTIFICATE OF ORGANIZATIONFILED EFFECTIVE LIMITED LIABILITY COMPANY

10 OCT -8 AM 8: 30

(Instructions on back of application)

1.	The name of the limited liability company is:		SECRE BRY OF STATE STATE OF IDAHO	
	CRO	OOKED LODGE, L	LC STATE OF IDAHO	
2.	,			
	5476 E FERNAN HILL RD COEUR D'ALENE ID 83814 (Street Address)			
	<u> </u>			
(Mailing Address, if different than street address)				
3.	The name and complete street address of the registered agent:			
	BOBBY D NAGRONE	5476 E FERNA	N HILL RD COEUR D'ALENE ID 83814	
	(Name)	(Street Address)		
4.	. The name and address of at least one member or manager of the limited liability company:			
	<u>Name</u>		Address	
٠.	BOBBY D NAGRONE	5476 E FERNA	N HILL RD COEUR D'ALENE ID 83814	
			The state of the s	
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5.	Mailing address for future correspon	dence (annual i	report notices):	
	5476 E FERNAN H			
			0-	
6.	Future effective date of filing (optional):			
_	nature of organizer(s). (An organizer is a	member, or is		
	ng in behalf of a member or members).		Secretary of State use only	
Sia	nature Bobby D NAGRONE BOBBY D NAGRONE	ne la	,	
Tvn	ped Name: BOBBY D NAGRONE			
7.		ms/cert		
Sig	nature	.LC fon	IDAHO SECRETARY OF STATE 10/08/2010 05:00	
Typed Name:		Vorms\	IDAHO SECRETARY OF STATE  10/08/2010 05:00  TOWNSON  IDAHO SECRETARY OF STATE  10/08/2010 05:00  TOWNSON  IDAHO SECRETARY OF STATE  10/08/2010 05:1242351  10/08/200 = 100.00 ORGAN LLC	

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