

## **CERTIFICATE OF ORGANIZATION FILED EFFECTIVE** LIMITED LIABILITY COMPANY 2015 APR 13 AM 10: 17

E TOU	(Instructions on	back of application)	SECRETAIN OF STATE
1. The nam	e of the limited liabili	ty company is:	SECRETAIN OF STATE STATE OF IDAHO
	O'Clock and More ょ.し.(		ļ
2. The com	plete street and maili	ng addresses of the ir	nitial designated office:
·	6603 main st, Bonners Ferry, 10 83865		
(Street Add			
	Bonners Ferry, ID 83805 (Mailing Address, if different than street address)		
· -		t address of the regis	tered agent:
Annie Fis	scher	521370 Hwy 95,	Bonners Ferry, ID 83805
(Name)		(Street Address)	
Annie ris	scrief	521370 HWY 95,	Borners Ferry,ID 83805
Annie Fis	scher	521370 Hwy 95,	Bonners Ferry,ID 83805
5 Mailing a	iddraee far futura carr	espondence (annual i	report notices):
-	lwy 95, Bonners Ferry, ID	•	report notices).
<u> </u>			
6. Future ef	ffective date of filing (	optional):	
_	f a manager, memb	er or authorized	
person.	$\circ$		Secretary of State use only
Signature	duni L'scher		
Typed Name: Annie Fischer			IDAHO SECRETARY OF STATE
· 3 fr = - ( )(			04/13/2015 05:00 CK:4006 CT:308848 BH:14705
Signature			16 100.00 = 100.00 ORGAN LLC
Typed Name			01.2000
. 7 II			W15033}

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