



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY FILED EFFECTIVE

(Instructions on back of application)

2014 JUL 28 AM 9:02

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

P. Craig Storti LLC

2. The complete street and mailing addresses of the initial designated office:

3614 Trail Circle

(Street Address)

Boise, ID 83704

(Mailing Address, if different than street address)

3. The name and complete street address of the registered agent:

P. Craig Storti

(Name)

3614 Trail Circle, Boise ID 83704

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

**Name**

**Address**

P. Craig Storti

3614 Trail Circle, Boise ID 83704

5. Mailing address for future correspondence (annual report notices):

3614 Trail Circle, Boise ID 83704

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature *P. Craig Storti*  
Typed Name: P. Craig Storti

Signature \_\_\_\_\_  
Typed Name: \_\_\_\_\_

Secretary of State use only

IDAHO SECRETARY OF STATE  
07/28/2014 05:00

CK: 3930 CT: 299414 BH: 1434871  
1@ 100.00 = 100.00 ORGAN LLC #2

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