

## CERTIFICATE OF ORGANIZATION I IMITED LIABILITY COMPANY

FILED EFFECTIVE

	mico cinon		2014 APR -3 PM 1:54	
	(Instructions on back of application)		SECRETARY OF STATE STATE OF IDAHO	
1. The name of	The name of the limited liability company is:		STATE OF IDAHO	
Black Hawk III	LLC			
2. The complete	e street and mailing	addresses of the initial desi	gnated office:	
	Ln., Ste 109 Coeur d'A	Mene, ID 83814		
(Street Address)				
(Mailing Address,	if different than street addres	ss)		
3. The name ar	nd complete street a	address of the registered ago	ent:	
Robert Newell	ı	1950 Bellerive Ln., Ste 109 Coeur d'Alene, ID 83814		
(Name)		(Street Address)		
The name are company:		st one member or manager	•	
_,	<u>Name</u>		Address	
Black Ha	awk I LLC	1950 Bellerive Ln., Ste 109	Coeur d'Alene, ID 83814	
5. Mailing addre	ess for future corres	pondence (annual report no	tices):	
	Ln., Ste 109 Coeur d'A	•		
1000 1101111	<u> </u>	10110, 12 00014		
6. Future effect	ive date of filing (op	tional):		
	<del>-</del> , ,			
Signature of a	manager, member	or authorized		
person.	1 1			
·	VIAn -		Secretary of State use only	
Signature/	abadi I Nakali			
Typed Name: Mi	Grapi J. NEWOII			
Signature	/ /			
			IDAHO SECRETARY OF STATE	
Typed Name:		<del></del>   c	04/03/2014 05:00 X: 1786252 CT: 172899 PH: 14185	

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