



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 OCT -1 AM 9:02

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

White Whiskey Smoke House L.L.C.

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

510 e 20th ave

(Street Address)

Post Falls ID 83854

(Mailing Address, if different than street address)

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

Clint Kruger

(Name)

510 e 20th ave Post Falls ID 83854

(Street Address)

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

Name

Address

Clint Kruger

510 e 20th Ave Post Falls ID 83854

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

510 e 20th Ave Post Falls ID 83854

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Clint Kruger

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE
10/01/2013 05:00
CK: NO CK # CT: 288132 BH: 1392286
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