

Signature_

Typed Name: _

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

题	(Instructions on back o	fapplication)	2008 JUL 28 AM 10: 28
1.	The name of the limited liability company is:		SECRETARY OF STATE STATE OF IDAHO
• •	•	NCH LEASING, LLC	
2.	The complete street and mailing addresses of the initial designated/principal office:		
	1025 HIDEAWAY LANE, KETCHUM, ID 83340		
	(Street Address) P.O. BOX 9080 KETCHUM, ID 83340		
	(Mailing Address, if different then street address)		
3.	The name and complete street address of the registered agent:		
	CHARLES CONN	1025 HIDEAWAY LA	NE, KETCHUM, ID 83340
	(Name) (Street Address)		
	The name and address of at least one member or manager of the limited liability company:		
	Name Address		
	CHARLES CONN P.O. BOX 9080 KETCHUM, ID 83340		KETCHUM, ID 83340
			•
=	Mailing address for future correspondence (annual report notices):		
5.	P.O. BOX 9080 KETCHUM, ID 83340		
6.	Future effective date of filing (optional):	
Siar	tature of organizer(s). (An organizer is a m	ember, or is	
_	g in behalf of a member or members).	1	Canadan, of Chile and only
-	Town M Seiner	N, N 2	Secretary of State use only
_	ed Name: LOUIS M. MEINER, JR.	N K	
тур	ed Name: LOUIS M. MEINER, JR.		
		158	•

IDAHO SECRETARY OF STATE

07/28/2008 05:00

CK: 136300 CT: 172099 BH: 1128947

1 0 180.00 = 100.00 ORGAN LLC # 2

1 0 20.00 = 20.00 EXPEDITE C # 3

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