



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

OCT 25 AM 9:17

(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Timberpoint LLC

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

133 Marlee Drive Sandpoint, ID 83864

(Street Address)

133 Marlee Drive Sandpoint, ID 83864

(Mailing Address, if different than street address)

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

James Smith

(Name)

133 Marlee Drive Sandpoint, ID 83864

(Street Address)

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

NameAddress

James Smith

133 Marlee Drive Sandpoint, ID 83864

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

133 Marlee Drive Sandpoint ID 83864

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature

James Smith

Typed Name: James Smith

Signature

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
10/25/2010 05:00
CK: 1601 CT: 252262 BH: 1244447
1 P 100.00 = 100.00 ORGAN LLC # 2

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