



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the application in duplicate.

**FILED EFFECTIVE**

2016 DEC -6 AM 9:01

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Timber Town Wicks LLC

(Remember to include the words "Limited Liability Company," "Limited Company," or the abbreviations LLC, LLC, or LC)

2. The complete street and mailing addresses of the principal office is:

511 Skyline Drive, Cascade, ID 83611

(Street Address)

PO Box 544, Cascade, ID 83611

(Mailing Address, if different)

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

Kathleen M. Wilson

511 Skyline Drive, Cascade, ID 83611

(Name)

(Address cannot be a post office box or postal mail box)

4. The name and address of at least one governor of the limited liability company:

Kathleen M. Wilson

511 Skyline Drive, Cascade, ID 83611

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

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

PO Box 544, Cascade, ID 83611

(Address)

Signature of organizer(s).

Signature:

*Kathleen M. Wilson*

Printed Name: Kathleen M. Wilson

Signature:

Printed Name: Kathleen M. Wilson

Secretary of State use only

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12/06/2016 05:00

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