## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

	(Instructions on ba	eck of application)	MIN JON 26 FR 2. 84	
	(maddadia on be	аск от аррпоацоп)	SECRETARY OF STATE	
1. The name of	of the limited liability	STATE OF IDAHO	4	
Vital Fabrica	tion and Repair, LLC			
2 The comple	to street and mailing	addresses of the initial des	ignated office:	
•	Road; Sandpoint, ID 836		ngnateu omoe.	
(Street Address				
PO Box 562;	Sagle, ID 83860			
(Mailing Addres	s, if different than street address	3)		#
3. The name a	and complete street a	ddress of the registered ag	ent:	1
adday ad Manda		40 Florings Bands Consta		
Wayd York	Wayd York 12 Flamingo Road; Sandpoint, ID 83864 (Name) (Street Address)			
(1101110)		(Street Mulicop)		
4. The name a	and address of at least	t one member or manager	of the limited liability	
company:		t one member of manager	of the infined naphity	
	Name	<u>A</u>	ddress	#
Wayd York	Wayd York 12 Flamingo Road; Sandpoint, ID 83864			
			<u></u>	. 1
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				1
5. Mailing address for future correspondence (appural conoct nations):				
<ol> <li>Mailing address for future correspondence (annual report notices);</li> <li>PO Box 562; Sagle, ID 83860</li> </ol>				
1000000	Cagiot in passes		No.	1
6 Future offer	tive date of filing (opt	ional):		Ä
o. Tutule elice	dive date of filling (opt	1011di).		
Ot		el . st . al		
_	manager, member	or authorized		
person.	1 1 7		Secretary of State use only	
Signature	Ward la	hR		類
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· Albana cancera —			IDAHO SECRETARY OF STA	
Signature		ר-ישביי ק	06/26/2014 05:0 .008786 CT:172099 BH:	1.5
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