

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

Title 30, Chapters 21 and 25, Idaho Code Filing fee: \$100 typed, \$120 not typed

2018 MAR 12 AM 9: 05

Complete and submit the application in duplicate.

SECRETARY OF STATE STATE OF IDAHO

| 8880 MARINE DR POST FA | g addresses of the principal office is: LLS, ID 83854 |
|--------------------------------|---|
| Street Address) | |
| Mailing Address, if different) | |
| The name of the registered age | ent and the street address of the registered agent: |
| COLLEEN HOLMES | 8880 MARINE DR POST FALLS, ID 83854 |
| Name) | (Address cannot be a post office box or postal mail box.) |
| COLLEEN HOLMES | ast one governor of the limited liability company: 8880 MARINE DR POST FALLS, ID 83854 |
| Name) | (Address) |
| THOMAS M HOLMES III | 8880 MARINE DR POST FALLS, ID 83854 |
| Name) | (Address) |
| Name) | (Address) |
| Name) | (Address) |
| - | spondence (annual report notices): LLS, ID 83854 |
| 0000 MARINE DR POST FA | LLS, ID 03034 |

Printed Name: COLLEEN HOLMES

THOMAS M HOLMES III

Printed Name:

CK:9391 CT:332679 BH:1631643 1@ 100.00 = 100.00 ORGAN LLC #2

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