

ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

	FILED
	SOF ORGANIZATION LIABILITY COMPANY ons on back of application) iability company is:
(Instruction	ons on back of application)
The name of the limited I	iability company is:
The street address of the	e initial registered office is:
843 Highland Avenue	
and the name of the initia	al registered agent at the above address is:
Shauna Everhart	
he mailing address for f	uture correspondence is:
843 Highland Avenue	St.Maries Idaho 83861
f management is to be v	rested in one or more manager(s), list the name(s) and the initial manager. If management is to be vested in the
address(es) of at least o	
If management is to be v address(es) of at least o member(s), list the name	rested in one or more manager(s), list the name(s) and ne initial manager. If management is to be vested in the e(s) and address(es) of at least one initial member.
If management is to be v address(es) of at least o member(s), list the name	rested in one or more manager(s), list the name(s) and ne initial manager. If management is to be vested in the e(s) and address(es) of at least one initial member. Address
If management is to be viaddress(es) of at least o member(s), list the name Name	rested in one or more manager(s), list the name(s) and ne initial manager. If management is to be vested in the e(s) and address(es) of at least one initial member. Address 843 Highland Avenue St.Maries Idaho 83861
If management is to be viaddress(es) of at least o member(s), list the name Name	rested in one or more manager(s), list the name(s) and ne initial manager. If management is to be vested in the e(s) and address(es) of at least one initial member. Address 843 Highland Avenue St.Maries Idaho 83861
If management is to be very address(es) of at least or member(s), list the name Name Kelly Everhart Shauna Everhart Signature of at least one	rested in one or more manager(s), list the name(s) and me initial manager. If management is to be vested in the e(s) and address(es) of at least one initial member. Address 843 Highland Avenue St.Maries Idaho 83861 843 Highland Avenue St.Maries Idaho 83861 e person responsible for forming the limited liability company:
If management is to be very address(es) of at least or member(s), list the name Name Selly Everhart Shauna Everhart Signature of at least one	rested in one or more manager(s), list the name(s) and me initial manager. If management is to be vested in the e(s) and address(es) of at least one initial member. Address 843 Highland Avenue St.Maries Idaho 83861 843 Highland Avenue St.Maries Idaho 83861 e person responsible for forming the limited liability company:
If management is to be viaddress(es) of at least or member(s), list the name Name Kelly Everhart Shauna Everhart Signature of at least one Signature: Locky 2 Typed Name: Kelly Ever	rested in one or more manager(s), list the name(s) and me initial manager. If management is to be vested in the e(s) and address(es) of at least one initial member. Address 843 Highland Avenue St.Maries Idaho 83861 843 Highland Avenue St.Maries Idaho 83861 e person responsible for forming the limited liability company: Secretary of State use only thant
If management is to be viaddress(es) of at least or member(s), list the name Name Kelly Everhart Shauna Everhart Signature of at least one	rested in one or more manager(s), list the name(s) and me initial manager. If management is to be vested in the e(s) and address(es) of at least one initial member. Address 843 Highland Avenue St.Maries Idaho 83861 843 Highland Avenue St.Maries Idaho 83861 e person responsible for forming the limited liability company: Secretary of State use only thant
If management is to be vaddress(es) of at least of member(s), list the name Name Kelly Everhart Shauna Everhart Signature of at least one Signature: Kelly Everhart Typed Name: Kelly Everhart	rested in one or more manager(s), list the name(s) and one initial manager. If management is to be vested in the e(s) and address(es) of at least one initial member. Address 843 Highland Avenue St. Maries Idaho 83861 843 Highland Avenue St. Maries Idaho 83861 e person responsible for forming the limited liability company: Secretary of State use only thant

W31323