

CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

11 AUG 22 AM 9: 23

The state of the s	(IIISTRUCTIONS ON DACE	(or application)	SECRE TRY OF STATE
1. T	he name of the limited liability cor	mpany is:	STATE OF IDAHO
	·	stLake Water Services LLC	
2. T	The complete street and mailing addresses of the initial designated/principal office:		
	16720 S. Carlin Bay Rd, Harrison, ID 83 (Street Address)	9833	
	`		
	(Mailing Address, if different than street address)		
3. T	The name and complete street address of the registered agent:		
	David J Banks	16720 S. Carlin Bay Rd, I	Harrison, ID 83833
	(Name)	(Street Address)	
		$T_{ij}(x) = \{x_i \in \mathcal{X}_i \mid x_i \in \mathcal{X}_i\}$	
	The name and address of at least one member or manager of the limited liability company:		
	Name	£	ddress
	Dave J Banks	16720 S. Carlin Bay Rd, I	Harrison, ID 83833
	Susan F Banks	16720 S. Carlin Bay Rd,	Harrison, ID 83833

5. N	Mailing address for future correspo		iotices):
	16720 S. Carlin Bay Rd, Harrison, ID 83	3833	
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6 . F	future effective date of filing (optio	nai):	
۵.		ام مداد م ملاد د د	
-	ature of a manager, member o	r autnorized	
perso	лі. <i>Л</i>		Secretary of State use only
Signa	ature David & Banks		
	d Name: David J Banks		
			**
Signa	ature Dupan Banks		IDAHO SECRETARY OF STATE

IDAHO SECRETARY OF STATE

08/22/2011 05:00

CK: 2151 CT: 261752 BH: 1287427
1 2 188.60 = 188.80 ORSAN LLC # 2

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Typed Name: Susan F Banks