



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2012 FEB 14 AM 9:14
SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

PECK FAMILY, L.L.C.

2. The complete street and mailing addresses of the initial designated office:

3386 N. HWY 41, POST FALLS ID 83854

(Street Address)

(Mailing Address, if different than street address)

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

GREG PECK

(Name)

3386 N. HWY 41, POST FALLS ID 83854

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name	Address
GREG & BONNIE PECK	4832 W HIGHLAND DRIVE CDA ID 83814
JAMES W. PECK	17931 S BULLRUN RD CATALDO ID 83810
DEAN & CAROLE GRIFFIN	5137 E RIVERPLACE POST FALLS ID 83854
SHIRLEY CARTER	1310 E WALLACE AVE CDA ID 83814
AL & SHERI ANDREWS	4755 COCHESS AVE BOISE ID 83709

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

3386 N. HWY 41, POST FALLS ID 83854

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature Greg Peck
Typed Name: GREG PECK MEMBER

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
02/14/2013 05:00
CK: 16942 CT: 210988 BH: 1360252
1 @ 100.00 = 100.00 ORGAN LLC # 2

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