CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2013 SEP 30 AM 9: 07

1. The name of the limited liability company is:	SECRETARY OF STATE
Conine Bed & Breakfas	ELLC STATE OF IDAHO
2. The complete street and mailing addresses of t	
688 Eagle DR Spirit lake Ic	taho 83969
(Mailing Address, if different than street address)	
3. The name and complete street address of the r	registered agent:
Roberta Campbell <u>Le88 E</u> (Name) (Street Address	Eagle DR Spirit Lake Id 83869
The name and address of at least one member company:	or manager of the limited liability
Roberta Campbell 688 Ea	gle DR Spirit Lake Id 83869
5. Mailing address for future correspondence (annual Lease Eagle DR Spirit Lake	nual report notices):
6. Future effective date of filing (optional):	
Signature of a manager, member or authorized person.	
Signature Joseph a amphell	Secretary of State use only
Typed Name: Roberta Campbell	
Signature	IDAHO SECRETARY OF STATE 69/30/2013 65:00
Typed Name:	CX: 1867 CT: 288873 BH: 1392855 1 0 188.08 = 188.08 ORGAN LLC # 2

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