

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED

(Instructions on back of application)

2013 NOV 29 PM 1: 33

The name of the limited liability compar TREISKAIDEKAPHILIA LLC	ony is: SECHETALY OF STATE STATE OF IDAHO
2. The complete street and mailing addres	ses of the initial designated office:
17 BANNOCK STREET, MALAD CITY, IDAH	0
(Street Address) P O BOX 20, MALAD CITY, ID 83252	
(Mailing Address, if different than street address)	
The name and complete street address of the registered agent:	
	BANNOCK STREET, MALAD CITY, IDAHO
(Name) (Si	reet Address)
 The name and address of at least one member or manager of the limited liability company: 	
Name	<u>Address</u>
CHARLES THURBER 17	BANNOCK STREET, MALAD CITY, IDAHO
5 Mailing address for the	
 Mailing address for future correspondence (annual report notices): P O BOX 20, MALAD CITY, ID 83252 	
. 0 50X 20, WALAD 0111, 1D 83252	
6. Future effective date of filing (optional): 13 DECEMBER 2013	
Signature of a management	
Signature of a manager, member or authorized person.	
	Secretary of State use only
Signature 0	
Typed Name: CHARLES THURBER	
	IDAHO SECRETARY OF STATE
Signature	11/29/2013 05:00
Typed Name:	1 0 100.00 = 100.00 OKGAN LLC # 2

W131651