

## **CERTIFICATE OF ORGANIZATION** LIMITED LIABILITY COMPANY 09 SEP -8 AM 9: 01

(Instructions on back of application)

SECRETARY OF STATE

The name of the limited liability co-	mpany is:	STATE OF IDAHO
Wats	son Grocery Group, L	LC .
2. The complete street and mailing ac	Idresses of the ini	-
(Street Address)	Estates Ett. Onattare	y, viv. 0000
(Mailing Address, if different than street address)		
3. The name and complete street add	ress of the registe	ered agent:
Marrian Cayko	301 S. 13th	Street Coeur d' Alene, ID. 83814
(Name)	(Street "Address)	
The name and address of at least of company:	one member or m	
Name Dale Watson	35211 N. Rive	Address r Estates LN. Chattaroy, WA. 99003
		,
	· ••••	and the second s
-		
5. Mailing address for future correspo	ndence (annual re	eport notices):
	Estates LN. Chattard	
	· · · · · · · · · · · · · · · · · · ·	
6. Future effective date of filing (option	nal):	
Signature of organizer(s). (An organizer is acting in behalf of a member or members).	a member, or is	
acting in bestall of a member of members).	o o	Secretary of State use only
Signature Wale Walker	)   S   S   S   S   S   S   S   S   S	
Typed Name: Dale Watson		
Signature	rptormstl.LC formstert, org. lc. PMD Ravised 07/2008	IDAHO SECRETARY OF STATE 99/08/2009 05:00 CK: 2415 CT: 248333 BH: 1185967
Typed Name:	rpitom	1 0 20.00 = 100.00 ORGAN LLC # 2