



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2012 OCT 22 AM 9:42
STATE OF IDAHO

1. The name of the limited liability company is:

MTE, LLC

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

37 WHISPER RIDGE ROAD PO BOX 902, SALMON, ID 83467

(Street Address)

(Mailing Address, if different than street address)

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

REGISTERED AGENTS INC

(Name)

105 S. 6TH STE A, COEUR D'ALENE, ID 83814

(Street Address)

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

Name

Address

TERRY HUNT

37 WHISPER RIDGE ROAD PO BOX 902, SALMON, ID 83467

SUSAN HUNT

37 WHISPER RIDGE ROAD PO BOX 902, SALMON, ID 83467

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

105 S. 6TH STE A, COEUR D'ALENE, ID 83814

6. Future effective date of filing (optional): _____

Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).

Signature

Marsha Siha

Typed Name: MARSHA SIHA

Signature _____

Typed Name: _____

Secretary of State use only

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Revised 07/2008

IDAHO SECRETARY OF STATE
10/22/2012 05:00
CK: 26891 CT: 187501 BH: 1344589
1 @ 100.00 = 100.00 ORGAN LLC # 2

WU 8333