

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

2012 NOV -9 AM 9: 12

CE tr	(Instructions on bac	k of application)	SECHETARY OF STATE STATE OF IDAHO
1.	The name of the limited liability co	ame of the limited liability company is:	
2.	2. The complete street and mailing addresses of the initial designated office:		
	407 N. Polk Street, Moscow, Idaho 83843		
	(Street Address)		_
	(Mailing Address, if different than street address)		
3.	The name and complete street address of the registered agent:		
	Nicole Werner	407 N. Polk Street, Moscow, Idaho 83843	
	(Name)	(Street Address)	
4.	The name and address of at least one member or manager of the limited liability company:		
	Name	Address 407 N. Della Street, Massaya Idaha 93943	
	Nicole Werner	407 N. Polk Street, Moscow, Idaho 83843	
	Steffen Werner	407 N. Polk Street, Moscow, ID 83843	
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5	Mailing address for future correspo	ondence (annual reno	rt notices).
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6.	Future effective date of filing (optional):		
	5		
-	nature of a manager, member o	r authorized	
per	son.		Secretary of State use only
Sia	nature MIIP & Wel		
Tvn	ed Name: Nicole Werner		
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Sigi	nature		IDAHO SECRETARY OF STATE 11/09/2012 05:00
		i	CK: 2892 CT: 275796 BH: 1347165
6. Sig pers Sigs Typ		onal):	Secretary of State use only IDAHO SECRETARY OF STATE 11/09/2012 05:

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