



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

FILED EFFECTIVE

2014 NOV -6 AM 9:21

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Inland Pacific Northwest Ventures LLC

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

985 Loch Lomond, Hayden, ID 83835

(Street Address)

(Mailing Address, if different than street address)

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

Marcus Harrell "MARK"
(Name)

985 Loch Lomond, Hayden, ID 83835
(Street Address)

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

<u>Name</u>	<u>Address</u>
Marcus Harrell, Manager	985 Loch Lomond, Hayden, ID 83835
_____	_____
_____	_____
_____	_____
_____	_____

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

985 Loch Lomond, Hayden, ID 83835

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

Signature of a manager, member or authorized person.

Signature MARK HARRELL 11/3/14
Typed Name: Marcus Harrell, Manager "MARK"

Signature _____
Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE
11/06/2014 05:00
CK:102 CT:302957 BH:1448427
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