

CERTIFICATE OF ORGANIZATION 23 PM 1:53 LIMITED LIABILITY COMPANY OF STATE

(Instructions on back of application) STATE OF IDAHO

,	Office -
. The name of the limited liability company is:	
SBL ENTERPRISE LLC	
. The complete street and mailing addresses of the ini	tial designated/principal office:
(Street Address)	
(Mailing Address, if different than street address)	
. The name and complete street address of the registe	ered agent:
STEPHEN HARRIS (Street Address)	LINGEN ST.
(Marile) (Ottoot Address)	
. The name and address of at least one member or ma	anager of the limited liability
company:	
Name	<u>Address</u>
BONNIE HARRIS 306 W.	lingen st
STEPHEN HARRIS 306 W.	LINDEN ST.
	4.
. Mailing address for future correspondence (annual re	eport notices):
306 W. LINDEN ST.	
Future effective date of filing (optional):	
gnature of a manager, member or authorized	
erson.	Secretary of State use only
Mark	**************************************
ped Name: 1 Stephen S. HARRIS	
gnature	Though Gerpetary Of State
gnature	IDANO SECRETARY OF STATE @1/23/2012 @5:0 CK: 884093 CT: 172099 BH: 130