## FILED EFFECTIVE



## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

SECRETARY OF WATE. STATE OF WATO

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(Instructions on back of application)

1. 7	The	name of	the limited	liability	company	is:
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2. The complete street and mailing addresses of the initial designated office: 2503 District 5 Rd Bonners Ferry, ID 83805

(Street Address)

(Mailing Address, if different than street address)

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

Gordon Newell

2503 District 5 Rd Bonners Ferry, ID 83805

(Street Address)

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

**Address** Gordon Newell 2503 District 5 Rd Bonners Ferry, ID 83805 Cal Bateman 238 Syringa Dr Bonners Ferry, ID 83805 Melissa Bateman 238 Syringa Dr Bonners Ferry, ID 83805 Sarah Newell 2503 District 5 Rd Bonners Ferry, ID 83805

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

2503 District 5 Rd Bonners Ferry, ID 83805

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Signature

Typed Name: Gordon Newell

Signature\_

Typed Name: Cal Bateman

Secretary of State use only

IDAHO SECRETARY OF STATE

03/15/2012 05:00

CK: 933664 CT: 172099 BH: 1315347

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