

CERTIFICATE OF ORGANIZATION

09 MAR -2 AM 8: 29

SECRETARY OF STATE

LIMITED LIABILITY COMPANY (Instructions on back of application)

 The name of the limited liability of 	ompany is:	STATE OF IDAHO	
	Bear Lake Air, L.L.C.		
2. The complete street and mailing a	ddresses of the initial designated	/principal office:	
	00 North, St. Charles, Idaho 83272		
(Street Address) P. O. Bo	x 26, St. Charles, Idaho 83272		
(Mailing Address, if different than street address)		*************************************	
3. The name and complete street ad	dress of the registered agent:		
Leisa Transtrum	188 West 100 North, St. Charl	es, Idaho 83272	
(Name)	(Street Address)		
. The name and address of at least company:	_	mited liability	
Name		Address	
Monte Transtrum	188 West 100 North, St. Charles, Idaho 83272		
Leisa Transtrum	188 West 100 North, St. Charl	es, Idaho 83272	
. Mailing address for future corresponding P. O. Bo	ondence (annual report notices): x 26, St. Charles, Idaho 83272		
Future effective date of filing (option	onal):	· · · · · · · · · · · · · · · · · · ·	
gnature of organizer(s). (An organizer in	s a member, or is	•	
ting in behalf of a member or members).		of State use only	
gnature Monte Isan	string &		
ped Name: Monte Transtruf	Trum 100		
gnature Less Wans	Truen	IDANO SECRETARY OF STATE	
yped Name; Leisa Transtrun	n Wilson CX:	3/02/2009 05:0	

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