



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

**FILED EFFECTIVE**

2014 AUG 14 PM 3:36

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

PHA LLC

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

1296 River Road

(Street Address)

Buhl Id 83316

(Mailing Address, if different than street address)

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

Gary Perron

(Name)

1296 River Road Buhl Id 83316

(Street Address)

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

Name

Address

Gary Perron

1296 River Road Buhl Id 83316

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

1296 River Road Buhl Id 83316

6. Future effective date of filing (optional):

Signature of a manager, member or authorized person.

Secretary of State use only

Signature

Typed Name: Gary Perron

IDAHO SECRETARY OF STATE

08/15/2014 05:00

Signature

Typed Name:

CK:2140476 CT:172099 BH:1437406  
1@ 100.00 = 100.00 ORGAN LLC #2

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