

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

2015 JAN -8 AM 8:55

(Instructions on bac		pack of application	SECHETARY OF STATE	
1. The name	of the limited liability	company is:	SECRETARY OF STATE STATE OF IDAHO	
2730 Gran				
2. The compl	ete street and mailing	addresses of the	initial designated office:	
1040 Brow	ns Lane, Potltach, ID 838	55- <del>97</del> 67	-	
(Street Addres	SS)			
(Mailing Addre	ess, if different than street addre	ss)		
3. The name	and complete street a	address of the regi	stered agent:	
Larry Leppelman (Name)		1040 Browns L	1040 Browns Lane, Potlatch, ID 83855-9767	
		(Street Address)		
4. The name company:		st one member or	manager of the limited liability	
Name Larry Leppelman		10/0 Provence !	Address 1040 Browns Lane, Pottatch, ID 83855-9767	
Clara Leppe	eiman	1040 Browns La	ane, Potlatch, ID 83855-9767	
<del></del>				
	-			
		<del></del>		
5. Mailing add	ress for future corresp	pondence (annual	report notices):	
1040 Brown	s Lane, Potlatch, ID 8385	5-9767		
Future effec	ctive date of filing (opt	.:		
or attack click	save date of ming (opt	ional):		
ignature of a erson.	manager, member	or authorized		
			Secretary of State use only	
Signature Fang Typh			IDAHO SECRETARY OF STATE	
yped Name: L	arry Leppein an		01/08/2015 05:00 CK:6165 CT:304931 BH:145614	
ignature	no Links		16 100.00 = 100.00 ORGAN LLC	
yped Name:	Clara Leppelman			

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