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		ORGANIZATION	UBFEB25 AN B: 26 SECRETARY OF STATE STATE OF OF STATE
	(Instructions on ba	ack of application)	AFE OF OF ST
1. The n	ame of the limited liability of	company is:	DAHOTE
NuP	hotonix, LLC		
2. The s	treet address of the initial re	egistered office is:	
	2 N 3rd Street Coeur d'Alen	-	
and th	ne name of the initial registe	ered agent at the above add	ress is:
	ky Finney		
3. The n	nailing address for future co	rrespondence is:	
	2 N 3rd Street Coeur d'Alene		
4. The li	mited liability company will I	be <sup>.</sup>	
	ger-managed 🔲 or Mem		shoel the commister have
			check the appropriate box)
5. If mar If mer	nager-managed, list the nan nber-managed, list the nam	ne(s) and address(es) of at least of at le	least one initial manager.
	Name		dress
Beck	ky Finney	1512 N 3rd Street Coe	ur d'Alene, ID 83814
		******	······
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entre and a constant			<u> </u>
• ****			
6. Signat	ure of at least one person r	esponsible for forming the	imited liability company:
6. Signat	ture of at least one person r	responsible for forming the l	imited liability company:
Signatu	In Bart	· · · · · · · · · · · · · · · · · · ·	imited liability company: Secretary of State use only
Signatu Typed	Name: Becky Finney	· · · · · · · · · · · · · · · · · · ·	
Signatu Typed	In Bart	· · · · · · · · · · · · · · · · · · ·	
Signatu Typed Capaci	Name: Becky Finney		Secretary of State use only
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