



**CERTIFICATE OF ORGANIZATION
LIMITED LIABILITY COMPANY**

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(Instructions on back of application)

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Gayle A. Wilde, LLC

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

2226 E Cane, Boise, ID 83712

(Street Address)

(Mailing Address, if different than street address)

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

Gayle A. Wilde

(Name)

2226 E. Cane, Boise, ID 83712

(Street Address)

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

Name
Gayle & Ralph Wilde Family
Revocable Trust, dated
December 13, 2007

Address
2226 E. Cane, Boise, ID 83712

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

2226 E. Cane, Boise, ID 83712

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person. Gayle & Ralph Wilde Family

Revocable Trust, dated December 13, 2007

Signature By: Gayle A. Wilde

Typed Name: Gayle A. Wilde, Trustee

Secretary of State use only

Signature Gayle A. Wilde

Typed Name: _____

IDAHO SECRETARY OF STATE
11/01/2011 05:00
 CK: 2090 CT: 263813 BH: 1296484
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