State of Idaho

Office of the Secretary of State

CERTIFICATE OF REGISTRATION

OF

THE CKLP, LLC

File Number W 159337

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: December 7, 2015



SECRETARY OF STATE

202

FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

2015 DEC -7 AM IO: 03

SECRETARY OF STATE

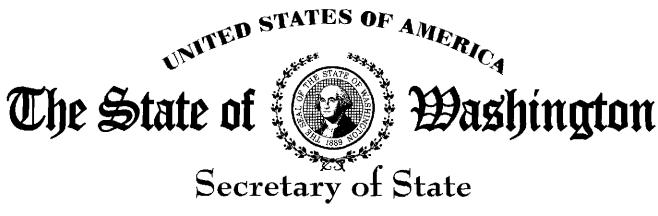
| 1. | The name of the entity is: THE | CKLP, LLC | |
|------------|---|-------------------------|--|
| 2. | The name which it shall use in Id | | ILP, LLC |
| | Select the type of entity you wish to register: (Enter a name here, only if you are required to adopt an alternate name) | | |
| ي . | * | - | al Partnarchia |
| | ☐ Business Corporation☐ Nonprofit Corporation | | al Partnership al Cooperative Association |
| | ☐ Limited Liability Partnership | | d Partnership (Including a limited liability limited partnership |
| | ☑ Limited Liability Company | | ory Trust, Business Trust, or Common-law Business Trust |
| | • | | ny mast, business must, of common law business must |
| | Other: (Use "Other" only if your for | eign entity type is not | listed above, and enter the type here.) |
| 4. | Jurisdiction of formation: State | of Washington | 1 |
| ⁴. | | // rovide ti | the domestic jurisdiction where the entity was formed) |
| 5. | The address of its principal office is: | | |
| | c/o Charles E. Silvernale, PO Box 2611, Poulsbo, Washington 98370 | | |
| | (Street Address) | | |
| | (Mailing Address, if different) | | |
| ^ | The address of its domestic principal office (if required by the laws of the jurisdiction of formation) is: | | |
| 6, | i ne address of its domestic princ | прагопісе (іт гефі | uired by the laws of the jurisdiction of formation) is: |
| | (Street Address) | | |
| | (Street Address) | | |
| | (Mailing Address, if different) | | |
| 7. | The mailing address to which correspondence should be addressed, if different from item 5, is: | | |
| | c/o Mary E. Silvernale Shook, 1064 Greenview Lane, Moscow, Idaho 83843-8726 | | |
| | (Address) | | |
| _ | • | | |
| 8. | Name and street address of registered agent in Idaho: | | |
| | Mary E. Silvernale Shook | | 64 Greenview Lane, Moscow, Idaho 83843-8726 |
| | (Name) (Address) | | |
| 9. | The name, capacity, and mailing address of at least one governor: | | |
| | Charles E. Silvernale | Gov., Mgr | PO Box 2611, Poulsbo, Washington 98370 |
| | (Name) | (Capacity) | (Address) |
| | Mary E. Silvernale Shook | Gov. | 1064 Greenview Lane, Moscow, Idaho 83843-8726 |
| | (Name) | (Capacity) | (Address) |
| | • | • | |
| | | | IDAHO SECRETARY OF STATE |
| | | | 12/08/2015 05:00 |
| | Mary E Silvarna | ale Shook | CK:11329 CT:310987 BH:1503274 |
| | Typed Name: Mary E. Silverna | IIC OHOOK | 9 10 100.00 = 100.00 FOR REG ST #2 |

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W159337

Signature:

Capacity: Governor of Foreign Entity



I, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF THE CKLP, LLC

I FURTHER CERTIFY that the records on file in this office show that the above named Limited Liability Company was formed under the laws of the State of WA and was issued a Certificate Of Formation in Washington on 11/29/2006.

I FURTHER CERTIFY that as of the date of this certificate, THE CKLP, LLC remains active and has complied with the filing requirements of this office.

Date: October 16, 2015

UBI: 602-672-300

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State