

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

09 DEC 16 AM 8: 29

(Instructions on back of application)

SECRETARY OF STATE

1. The name of the limited liability con	mpany is: STATE OF IDAHO		
Etcetera/ Krista Cater LLC 2. The complete street and mailing addresses of the initial designated/principal office: 1021 Silver Star Dr, Hailey, ID 83333 (Street Address) PO Box 3681, Hailey, ID 83333			
		(Mailing Address, if different than street address)	
		3. The name and complete street address of the registered agent:	
		Krista Cater	1021 Silver Star Dr, Hailey, ID 83333
(Name)	(Street Address)		
company:	one member or manager of the limited liability		
hame	Address		
Krista Cater	1021 Silver Star Dr, Hailey, ID 83333		
,			
	and a second remark matically		
5. Mailing address for future correspo	•		
POB	ox 3681, Hailey, ID 83333		
6. Future effective date of filing (option	nal):		
Signature of organizer(s). (An organizer is	a member, or is		
acting in behalf of a member or members).			
	Secretary of State use only		
Signature F7MM C	<u> </u>		
Typed Name: Krista Cater	IDAHO SECRETARY OF STATE 12/16/2009 05:206 CX: 131 CT: 24362 BH: 119943		
	SOO		
Signature	1DAHO SECRETARY OF STATE		
Typed Name:	12/16/2009 05:00 CK: 131 CT: 243862 BH: 119943		
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