

## CERTIFICATE OF ORGANIZATION I HAY 23 PM 2: 25 LIMITED LIABILITY COMPANY

(Instructions on back of application)

SECRETARY OF STATE

		STATE OF IDAHO	
1.	The name of the limited liability con		
	Lewiston Holdings LLC		
2.	The complete street and mailing addresses of the initial designated/principal office: 11120 N.E. 2nd Street Suite 100		
	(Street Address) Bellevue, WA 98004		
	(Mailing Address, if different than street address)		
3.	he name and complete street address of the registered agent:		
	Corporation Service Company	12550 W. Explorer Drive Suite 100 Boise ID 83713	
	(Name)	(Street Address)	
4.	The name and address of at least o company:	ne member or manager of the limited liability	
	<u>Name</u>	Address	
	Vic Dalosto	7467Snake River Rd., Asotin, WA 99402	
5.	5. Mailing address for future correspondence (annual report notices):  c/o Aero Law Group, P.O. Box 50228, Bellevue, WA 98015		
6. Future effective date of filing (optional):			
	nature of a manager, member or son.		
Sign	nature Jane & Scaha	Secretary of State use only	
-	ed Name: Jane E. Graham		
Sig	nature	IDAHO SECRETARY OF STATE	
	ed Name:		

cert\_org\_lic Rev. 07/2010

20.00 = 20.00 EXPEDITE C # 3

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