

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions	on back of application)	SECTION AM 9: 05
The name of the limited lia	ability company is:	VIATEORIAGATE
Contract Flooring Services, LL	<u>c</u>	<i>`≈∕10</i>
321 17th Avenue (Street Address)	ailing addresses of the initial o	designated office:
Lewiston ID 83501 (Mailing Address, if different than stree	et address)	
	reet address of the registered	agent:
Bryan Williams	321 17th Avenue, Lew	ston ID 83501
(Name)	(Street Address)	
company: Name Bryan Williams	321 17th Avenue, Lewi	Address ston ID 83501
<u>Name</u>	321 17th Avenue, Lewi	
<u>Name</u>	321 17th Avenue, Lewi	
<u>Name</u>	321 17th Avenue, Lewi	
Name Bryan Williams	orrespondence (annual report	ston ID 83501
Mailing address for future co	orrespondence (annual report	ston ID 83501
Mailing address for future of a manager, men	orrespondence (annual report 83501 g (optional):	ston ID 83501
Bryan Williams Mailing address for future co	orrespondence (annual report 83501 g (optional):	ston ID 83501

IDAHO SECRETARY OF STATE

08/01/2013 05:00

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Signature_

Typed Name: ____