

## CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

10 AUG 18 AM 8: 08

1.	The name of the limited liability company is:				SECRE BY OF STATE STATE OF IDAHO	
	NN ENTERPRISES LLC				SIAIEO	E IDAHO"
2.	ne complete street and mailing addresses of the initial designated/principal office:					
	109 Yankee Fork Road, Stanley, Idaho 83278					
	(Street Address) PO Box 216, Stanley, Idaho 83278					
	(Mailing Address, if different than street address)	,J				<del></del>
3.	The name and complete street address	ss of the reg	istered	agent:		
	Neil B. Anderson (Name)	109 Yanke (Street Address)		oad. Stanley	. Idaho 8327	8
4.	The name and address of at least one company:	e member o	r manag	er of the lin	nited liability	
	Name	<u>Address</u>				
	Neil B. Anderson	PO Box 216, Stanley, ID 83278				
	Nancy J. Anderson	PO Box 216, Stanley, ID 83278				
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5.	Mailing address for future correspond PO Box 216, Stanley, Idaho	•	al report	notices):	· · · · · · · · · · · · · · · · · · ·	
R	Future effective date of filing (optional	<b>!</b> }•			:	
Ů.	FULLIC SHOULTS GALE OF HAIR (OPENING	·				
-	gnature of organizer(s). (An organizer is a n	nember, or is		-		
acti	ing in behalf of a member or members).	. [		Secretary of	of State use only	
Sic	mature Neil B. Anders	de	5 6 7			
_	ped Name: Neil B. Anderson, Co-Mana	ger				
y	Pour Mario, Meli D. Anderson, Co-Maria		20 20 20 20 20 20 20 20 20 20 20 20 20 2			
•	ped Name: <u>NANCY T. Anor</u>	lerson	Revised 07/2008	IDAK <b>08/1</b> CK: 315 1 9 199.08	B/2010 ( CT: 250499 B)	STATE <b>35 ± 00</b> I: 1235257 IAN LLC <b>#</b> 2