



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

Title 30, Chapters 21 and 25, Idaho Code

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

Complete and submit the application in duplicate.

FILED EFFECTIVE

2016 JAN -6 AM 9:02

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

4 Winds Management , L.L.C

(Name of the limited liability company must be typed, and must be approved by the Secretary of State.)

2. The complete street and mailing addresses of the principal office is:

1608 State HYW 46

(Street Address)

P.O. BOx 576

(Post Office Box Address)

3. The name and complete street address of the registered agent:

Debbie Hampton

1608 State Hwy 46 Gooding, ID 83330

(Name)

(Address)

4. The name and address of at least one governor of the limited liability company:

Debbie Hampton

1608 State Hwy 46 Gooding, ID 83330

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

(Name)

(Address)

5. Mailing address for future correspondence (annual report notices):

P.O. Box 576 Gooding , ID83330

(Address)

Signature of organizer(s).

Printed Name: Debbie Hampton

Signature: Debbie Hampton

Printed Name: Doug Hampton

Signature: Doug Hampton

Secretary of State use only

IDAHO SECRETARY OF STATE

01/06/2016 05:00

CK:4002 CT:318596 BH:1507299

1@ 100.00 = 100.00 ORGAN LLC #2

W160502