



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

2014 APR 28 AM 10:11

SECRETARY OF STATE
STATE OF IDAHO

1. The name of the limited liability company is:

Boundary County Live, LLC

2. The complete street and mailing addresses of the initial designated office:

3691 Moon Shadow Road, Bonners Ferry, Idaho 83805

(Street Address)

P.O. Box 1640, Bonners Ferry, Idaho 83805

(Mailing Address, if different than street address)

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

Chuck Newhouse

(Name)

3691 Moon Shadow Road, Bonners Ferry, Idaho 83805

(Street Address)

4. The name and address of at least one member or manager of the limited liability company:

Name

Chuck Newhouse

Address

3691 Moon Shadow Road, Bonners Ferry, Idaho 83805

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

Boundary County Live, LLC, P.O. Box 1640, Bonners Ferry, Idaho 83805

6. Future effective date of filing (optional): _____

Signature of a manager, member or authorized person.

Signature _____

Chuck Newhouse

Typed Name: Chuck Newhouse, Owner / Manager

24 Apr 2014

Signature _____

Typed Name: _____

Secretary of State use only

IDAHO SECRETARY OF STATE

04/29/2014 05:00

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