



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

2015 JUN -3 AM 8:24

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Mastrofini Rental, LLC

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

410 N. 120 E., Shoshone, ID 83352

(Street Address)

(Mailing Address, if different than street address)

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

Diane M. Mastrofini

(Name)

410 N. 120 E., Shoshone, ID 83352

(Street Address)

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

Name

Mark E. Mastrofini

Address

410 N. 120 E., Shoshone, ID 83352

Diane M. Mastrofini

410 N. 120 E., Shoshone, ID 83352

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

410 N. 120 E., Shoshone, ID 83352

6. Future effective date of filing (optional): \_\_\_\_\_

Signature of a manager, member or authorized person.

Signature Mark E. Mastrofini  
Typed Name: Mark E. Mastrofini

Signature Diane M. Mastrofini  
Typed Name: Diane M. Mastrofini

Secretary of State use only

IDaho SECRETARY OF STATE  
06/03/2015 05:00

CK:2403 CT:310916 BH:1478100  
1@ 100.00 = 100.00 ORGAN LLC #2  
1@ 20.00 = 20.00 EXPEDITE C #3

W152307