

Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

09 OCT -2 AM 8: 34

SECRETARY OF STATE STATE OF IDAHO

The name of the inflied liability of	unipany is.	STATE OF IDAHO
В	enewah Beverages LLC	
The complete street and mailing a	addresses of the initial desig	nated/principal office:
966 West	Mustang Ave., Hayden, ID 83835	
(Street Address)		
(Mailing Address, if different than street address)		÷
The name and complete street ad	dress of the registered ager	nt:
Dennis Young	966 West Mustang Av	e., Hayden, ID 83835
(Name)	(Street Address)	* .
•		
The name and address of at least	one member or manager of	f the limited liability
company:	, .a.a.	
Name Don't Young	Add	
Donl Young	966 West Mustang Av	e., nayden, ID 53535
· · · · · · · · · · · · · · · · · · ·		*
		· · · · · · · · · · · · · · · · · · ·
Mailing address for future corresp	•	ces):
966 West	Mustang Ave., Hayden, ID 83835	· · · · · · · · · · · · · · · · · · ·
		£.
Future effective date of filing (option	onal):	` .
gnature of organizer(s). (An organizer i	s a member, or is	
ing in behalf of a member or members)	л 	ecretary of State use only
NO M	· / §	ecreary of care use only
gnature / Company	3	**************************************
/ped Name: Dennis Young	UC formstoart_org_	
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