



# CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY 2014 JUL 14 AM 9:37

(Instructions on back of application)

SECRETARY OF STATE  
STATE OF IDAHO

1. The name of the limited liability company is:

Story Homes LLC

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

111 N 1st Ave Suite B Sandpoint ID 83864  
(Street Address)

[REDACTED]  
(Mailing Address, if different than street address)

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

Nathan Story  
(Name)

111 N 1st Ave Suite B Sandpoint ID 83864  
(Street Address)

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

Name

Address

Amanda Story

111 N 1st Ave Suite B Sandpoint ID 83864

Nathan Story

111 N 1st Ave Suite B Sandpoint ID 83864

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

111 N 1st Ave Suite B Sandpoint ID [REDACTED] 83864

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

Signature of a manager, member or authorized person.

Signature

Nathan Story

Typed Name:

Nathan Story

Signature

Amanda Story

Typed Name:

Amanda Story

Secretary of State use only

IDAHO SECRETARY OF STATE

07/14/2014 05:00

CK:1013 CT:298911 BH:1432941

10 100.00 = 100.00 ORGAN LLC #2

10 20.00 = 20.00 EXPEDITE C #3

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