

251



# CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

FILED EFFECTIVE

(Instructions on back of application)

 2011 DEC -1 PM 2:44  
 SECRETARY OF STATE  
 STATE OF IDAHO

1. The name of the limited liability company is:

\_\_\_\_\_ LakeCo, LLC

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

209 Shadypines Loop, Priest River, ID 83856

(Street Address)

Same

(Mailing Address, if different than street address)

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

Travis W Holycross

(Name)

209 Shadypines Loop, Priest River, ID 83856

(Street Address)

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

Name

Address

Travis W Holycross

209 Shadypines Loop, Priest River, ID 83856

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

LakeCo, LLC, 209 Shadypines Loop, Priest River, ID 83856

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

Signature of a manager, member or authorized person.

Signature

*Lani Meek* 12/1/11

Typed Name: Lani Meek, Office Manager

Signature

Typed Name:

Secretary of State use only

IDAHO SECRETARY OF STATE  
 12/01/2011 05:00  
 CK: 843968 CT: 172099 BH: 1299998  
 1 @ 100.00 = 100.00 ORGAN LLC # 2

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