

Signature___

Typed Name:

CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

LIMITED LIADILITY COMPANY DOUBLING PM 1:33	•
(Instructions on back of application) SECRETARY OF STATE	•
1. The name of the limited liability company is:	
Luthen Lathen Rows Winegar LLC 2. The complete street and mailing addresses of the initial designated/principal office:	
(Street Address) W. Celestical Dr. Star ID 88/169	
(Malling Address, if different than street address) 3. The name and complete street address of the registered agent:	
William Lather 101 N Ramey Creek AVE (Street Address) Star, ID 83669	
4. The name and address of at least one member or manager of the limited liability company:	
Name · Address	٠ ٠
William Lathen 701 N. Romey Greek Aug. Star, Il Sandy Rowe 11533 W. Celestial Dr. Star, ID 83669	J G
	,
5. Mailing address for future correspondence (annual report notices): 701 N. Ramey Creek Aue, Star ID 83669	
6. Future effective date of filing (optional):	
Signature of organizer(s). (An organizer is a member, or is acting in behalf of a member or members).	
Signature <u>Jandy Rove</u> Typed Name: Sandy Rove	
THAT THE PROPERTY OF STATE	

IDAHO SECRETARY OF STATE 12/19/2008 05:00 CK: CASH CT: 232391 BH: 1149078 1 0 108.00 = 108.00 ORGAN LLC # 2