FILED EFFECTIVE



CERTIFICATE OF ORGANIZATION LIMITED LIABILITY COMPANY

08 OCT 15 PM 3: 27

(Instructions on back of application)

SECRETARY OF STATE STATE OF IDAHO

The name of the limited liability co	ompany is:
	Idaho Spirits, LLC
The complete street and mailing a	iddresses of the initial designated/principal office:
	Street, Suite 820, Boise, ID 83701
(Street Address)	
(Mailing Address, if different than street address))
The name and complete street ad	dress of the registered agent:
	225 N. 9th Street, Suite 820, Boise, ID 83701
Kimbell D. Gourley	(Street Address)
(Name)	(Olice: Marios)
The name and address of at least company:	t one member or manager of the limited liability
Name	<u>Address</u>
Kimbell D. Gourley	225 N. 9th Street, Suite 820, Boise, ID 83701
Mailing address for future corresp	oondence (annual report notices):
Kimbell D.Gourley, P.O.Box	
ु Future effective date of filing (opti	ional):
gnature of organizer(s). (An organizer	is a member, or is
ing in behalf of a member or members).	Secretary of State use only
gnature 70/ 9	The state of the s
ped Name: Kimbell D. Gourl	IDAHO SECRETARY OF
gnature	08
	CR: 57644 CT: 67242 1

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